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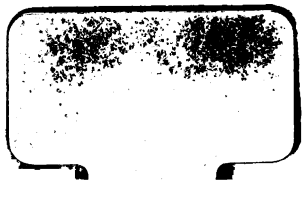

FALLACIES

OF

THE FACULTY,

BEING THE SPIRIT OF THE

CHRONO-THERMAL SYSTEM.

IN A SERIES OF LECTURES,

BY

SAMUEL DICKSON, M.D.

FORMERLY A MEDICAL OFFICER ON THE STAFF.

"We must cheat the most,
Work the best miracles, wrap nonsense round
In pomp and darkness, till it seems profound,
Play on the hopes, the terrors of mankind,
With changeful skill; * * * *
While Reason, like a grave-faced mummy stands
With her arms swathed in hieroglyphic bands."

MOORE.

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1839.

TO

THE RISING GENERATION

OF

MEDICAL PRACTITIONERS.

GENTLEMEN,

At a time when the Legislature of your country, so far from protecting you in the honourable exercise of the profession of medicine, holds out a bribe to the most unscrupulous of mankind to become your rivals in the practice of it;—when the *Schools* which pretend to expound its principles are little better than collusive combinations of tradesmen, whose only object is your plunder;—I cannot refrain from earnestly urging upon you the necessity for circumspection. In the present condition of society there is not a more thorny path than Medicine.—Every avenue to its emoluments is crowded with competitors, exerting all their energies to outstrip each other in the race;—and you have only to look around you to be satisfied that *Success* in this is less frequently the reward of patient Merit than of superior dexterity in the arts of intrigue, and the skilful appliance of corrupt and secret means. How long shall the power of Truth succumb to the pedantry and mockery of Profession? How long will too credulous mankind continue to be deluded by collegiate and corporation craft?—Arise!—awake from your slumber of confidence and security—examine for yourselves and cease to repose in the nothingness of a *reputation*, too often obtained by dishonest courses—or in *grey hairs*, not always redolent of wisdom. "In a second infancy," to use the words of an eloquent writer, "what hope remains?—reason grows weaker—the passions, the baser passions, the inferior sentiments of the heart—*avarice*, envy, self-conceit and *obstinacy* grow stronger, and the habits we then have accompany us to the grave."

To open your eyes to the fallacy and fatality of doctrines proceeding from quarters such as these, I have printed and published. May the pages of Truth and Nature be your only rudder and compass throughout your professional lives!

Your well-wisher,

S. DICKSON.

CLARGES STREET, PICCADILLY.
16TH OCTOBER, 1839.

FALLACIES OF THE FACULTY.

LECTURE I.

INTRODUCTION—PHENOMENA OF HEALTH AND SLEEP—DISEASE AND ITS TYPE—CAUSES.

GENTLEMEN,

WE daily hear of the march of intellect, of the progress or perfection of many branches of science. Has MEDICINE kept pace with the other arts of life,—has it fallen short or excelled them in the rivalry of improvement? This question will be variously answered. The more speculative and inexperienced members of the profession will naturally assign a high degree of excellence to their favourite pursuit; some of them may even smile at a question which they suppose has been long settled: but these rely for the most part on two great sources of error, the boasting assertions of disingenuous teachers, and the misrepresentations of the medical press; the greater number of which publications being, like the newspapers of the day, mere organs of party, have an object in crushing down and mystifying every truth that might militate against the interests of particular colleges and schools. The late Sir William Knighton, to much worldly wisdom and sagacity, joined a competent knowledge of the medical literature as well as medical science of his age. May I beg of you, Gentlemen, to lend me your attention while I give you his opinion of the later state of our art: "It is somewhat strange," he says, "that though in many arts and sciences, improvement has advanced in a step of regular progression from the first, in others it has kept no pace with time, and we look back to ancient excellence with wonder not unmixed with awe. Medicine seems to be one of those ill-fated arts, whose improvement bears no proportion to its antiquity. This is lamentably true, although Anatomy

has been better illustrated, the Materia Medica enlarged, and Chemistry better understood."

Gentlemen, I am inclined to believe with Heberden, that "the practice of physic has been more improved by the casual experiments of illiterate nations, and the rash ones of vagabond quacks, than by all the reasoning of all the *once celebrated* professors of it, and theoretic teachers, in the several schools of Europe; very few of whom have furnished us with one new medicine, or have taught us better to use our old ones, or have in any one instance at all, improved the art of curing diseases. Hence, though they have been applauded during the lives *of their disciples*, yet disinterested and impartial posterity has suffered each succeeding master of this sort, to be gathered to his once equally famous predecessors, and to be like them in his turn equally unread and forgotten."

"Morbi non eloquentia sed remediis curantur," is an observation some of you may have met in Celsus; yet strange to say, the generality of great professors, who have successively obtained the public ear since his time, have been most inveterate against every thing that savoured of innovation in the shape of remedies. Under the influence of the faculty of Paris, the French Parliament in 1566, declared it penal to prescribe *antimony* as a medicine; for no better reason than that it was patronized by the rival school of Montpelier. To gratify a similar spirit, the same faculty expunged *mercury* and *opium* from their Materia Medica; and such was their horror of improvement of any kind, that when the celebrated Ambrose Paré substituted the *ligature* of blood-vessels after amputation, for the cruel process of dipping the stump in boiling pitch, they persecuted him with the most remorseless rancour. In England even, so late as 1693, the president of the College of Physicians, by his warrant committed Dr. Groenvelt to Newgate, for administering *cantharides* internally, a remedy which the college have since adopted in their pharmacopeia; and when the invaluable *bark* was first introduced from Peru, by the jesuits, certain of the medical hypocrites of the time made that their chief reason for excluding it from

practice, under the pretence, that being a popish remedy, it must necessarily be of the devil's invention!

With these facts before our eyes, can we wonder that many should doubt the whole art of medicine, as practised by the faculty; or can we blame them for flying to the charlatan for that aid, which they have too often solicited at the hands of the profession in vain? "The great success of quacks in England," says Adam Smith, "has been altogether owing to the real quackery of the regular physicians." Lady Mary Montague, an equally shrewd observer of mankind, writing from Adrianople, upon the subject of small-pox inoculation, expresses no very high opinion of medical disinterestedness. "I am patriot enough," she says, "to take pains to bring this useful invention into fashion in England, and I should not fail to write to some of our doctors very particularly about it, if I knew *any one* of them that I thought *had virtue enough* to destroy such a considerable branch of his revenue for the good of mankind. But that distemper is too beneficial to them, not to expose to all their resentment, the hardy wight that should undertake to put an end to it." That she did not judge too harshly of the profession of her day, may be gleaned from her Life, by Lord Wharncliffe. "Lady Mary," says his Lordship, "protested that in the four or five years immediately succeeding her arrival at home, she seldom passed a day without repenting of her patriotic undertaking; and she vowed that she never would have attempted it, if she had foreseen the vexation, the persecution, and even the obloquy it brought upon her. The clamours raised against the practice, and of course against her, were beyond belief. The faculty all rose in arms to a man, foretelling failure, and the most disastrous consequences. The clergy descanted from their pulpits, on the impiety of thus seeking to take events out of the hands of Providence; the common people were taught to hoot at her as an unnatural mother, who had risked the lives of her own children; and notwithstanding that she soon gained many supporters amongst the higher and more enlightened classes, headed by the Princess of Wales, [Queen Caroline] who stood by

her firmly, some even of her acquaintances were weak enough to join in the outcry. We now read in grave Medical Biography, that the discovery was instantly hailed, and the method adopted by the principal members of that profession. Very likely they left this recorded, for whenever an invention or a project, and the same may be said of persons, has made its way so well by itself, as to establish a certain reputation, most people are sure to find out that they always patronized it from the beginning, and a happy gift of forgetfulness enables many to believe their own assertion. But what said Lady Mary of the actual fact, and actual time? why, that the four great physicians deputed by government, to watch the progress of her daughter's inoculation, betrayed not only such incredulity as to its success, but *such an unwillingness* to have it succeed, such an evident spirit of rancour and malignity, that she never cared to leave the child alone with them, one second, lest it should in some secret way suffer from their interference."

Gentlemen, the same reception awaited the discovery of the immortal Jenner. When this greatest of all the benefactors of the whole human race first promulgated his doctrine of *Vaccination*, he was ridiculed and laughed at by the whole profession; not one of whom would even listen to him with patience. But, even after the benefits which his practice had conferred upon mankind had been brought to the level of the meanest capacity by demonstrative truth, there were not wanting men to oppose him with every kind of abuse, embracing all the studied invective of personal rancour. By the Royal College of Physicians, not only was he persecuted and oppressed, but the pedants of that body declined to give him their license to practice his profession in London;—alleging, in excuse, his proper refusal to undergo their examination in Greek and Latin. The qualifications of the schoolmaster, not the attainments of the physician; the locality of study, rather than the extent of information possessed by the candidate, are still the indispensable preliminaries to the honours of the college. But

even religion and the bible were made engines of attack upon Jenner. Erhmann of Frankfort deduced from these his chief grounds of charge against the new practice, and he gravely " attempted to prove from quotations of the prophetical parts of scripture, and the writings of the fathers of the church, that the *Vaccine* was nothing less than Antichrist!" *Baron's Life of Jenner.*

What can be more humiliating to the feelings of men boasting a liberal profession, than disclosures like these? Truly, professors of physic differ little from the herd of mankind, who, according to Mr. Hazlitt, " generally stick to an opinion that they have long supported, and *that supports them.*"

The ancients endeavoured to elevate Physic to the dignity of a Science, but failed; the moderns, with more success, have done their best to reduce it to the level of a trade. Till the emoluments of those who chiefly practice it, cease to depend upon the quantity of useless drugs they mercilessly inflict upon their deluded patients;—till physicians be something more than mere puppets of the apothecary, and surgeons other than mechanics;—till the terrible system of collusion which now prevails under the name of a " good understanding among the different branches of the profession," be exposed, the medical art must continue to be a source of destruction to the many, —a butt for the ridicule of the discerning few. The Wits of every age and country have amused themselves at the expense of the physician; against his science they have directed all the shafts of their satire, and in the numerous contradictions and inconsistencies of its professors, they have found matter for some of their richest scenes. Molière makes one of his *dramatis personæ* say to another, " Call in a doctor, and if you do not like the physic he orders you, I'll soon find you another who will condemn it!" Rousseau shewed his distrust of the entire faculty, when he said " science which instructs you, and physic which cures you, are both alike excellent—but science which misleads, and physic which destroys, are equally execrable. Teach us how to distinguish them." Lord Byron held

similar opinions. Writing to a friend the detail of an illness from which he had been suffering, he tells him, "By the blessings of barley-water, and *refusing to see my physician*, I recovered!" When compelled to adopt at a future day a more orthodox line of conduct *under a precisely similar attack*, his Lordship was not equally fortunate. On that last sad occasion, as we shall too surely prove, he fell a victim to the fallacy of the medical art, as taught in the schools.

Medicine, nevertheless, when stripped of the verbiage and vain distinctions under which it has been so long *disguised* by its professors, will be found to be not only a simple, but satisfactory art. To explain this, we must view the subject in a very different light from any in which it has yet appeared. Medical facts can only have a value when properly represented. "Nothing," says Velpeau, "can lie like a fact. From the time of Hippocrates, to the present, facts seem to wish to deceive all mankind. Pinel referred to them to prove that all diseases originate in the solids—though, to me, these very facts demonstrate that many affections begin in the fluids. In a certain hospital facts would lead us to believe that antiphlogistics may prevent or even cure cancer of the womb; while, to my thinking, they intimate a result precisely the reverse. On one side, they permit a belief in the advantage of amputating the neck of this organ—the assertion of the cure of white swelling; on the other side, they contradict both. Enquire the most judicious treatment of Erysipelas. According to one authority, the best practice is the application of mercurial ointment. Another recommends the lancet; a third, nitrate of silver; a fourth, blisters. Facts would prove to me that all these practitioners are mistaken."

Take one more example of this incertitude in the treatment of disease, as we find it in Pulmonary Consumption, a disorder unhappily too prevalent in these islands. "One writer (Stohl) attributes the frequency of consumption to the introduction of the Peruvian bark. Another (Morton) considers the bark an effectual cure; a third (Reid)

ascribes the frequency of the disease to the use of mercury. A fourth (Brillonet) asserts that it is only curable by this mineral. A fifth (Rush) says that consumption is an inflammatory disease, and should be treated by bleeding, purging, cooling medicines and starvation; whilst a sixth (Salvadori) says it is a disease of debility, and should be treated by tonics, stimulating remedies and a generous diet. Galen recommended vinegar, as the best preventive of consumption. Desault and others assert that consumption is often brought on by a common practice with young people of taking vinegar to prevent obesity. Dr. Beddoes recommended foxglove as a specific in consumption. Dr. Parr found foxglove more injurious in his practice than beneficial."—*Sir Arthur Clarke.*

Now, what are we to infer from all this? Not, as some of you might be tempted to believe, that the science is deceptive or incomprehensible throughout; but that its professors, to this very hour, have neglected to make themselves acquainted with the true principles on which remedies act, and know as little of the true nature of the diseases whose treatment they so confidently undertake. To my mind, it verifies the vulgar adage that 'what is one man's meat, is another man's poison.' For almost all the remedies which these authors have either lauded or decried, may, as we shall hereafter show, cure, cause, aggravate or ameliorate any given case of disease, whether consumptive or otherwise, according to the dose of the substance, and constitution of the respective patients, for whom they may be prescribed.

"If false facts," says Lord Bacon, "be once on foot, what through neglect of examination, the countenance of antiquity, and the use made of them in discourse, they are scarce ever retracted." The late Professor Gregory used often to declare in his class room, that ninety-nine out of a hundred medical facts were so many medical lies, and that medical doctrines were for the most part little better than stark-staring nonsense;—and this, gentlemen, we shall have some amusement in proving to you.—In the meantime, we may observe, that nothing can more

clearly explain the difficulties which beset the student of physic—for who can understand nonsense—and, when clothed in phrases, which now admit one sense now another, what so difficult to refute? "Nothing," says Sir Humphrey Davy "has so much checked the progress of philosophy, as the confidence of teachers in delivering dogmas as truths, which it would be presumptuous to question. It was this spirit which, for more than ten centuries, made the crude physics of Aristotle the natural philosophy of the whole of Europe. It was this spirit, which produced the imprisonment of the elder Bacon and the recantation of Galileo. It *is* this spirit, notwithstanding the example of the second Bacon assisted by his reproof, his genius and his influence, which has, even in later times, attached men to imaginary systems, to mere abstracted combinations of words, rather than to the visible and living world, and which has often induced them to delight more in brilliant dreams, than in beautiful and grand realities."

The generality of students imposed upon by these abstracted combinations of words, will find it difficult to divest themselves of the erroneous and mystical distinctions, by which their teachers have too often endeavoured to conceal their own ignorance:—for "in the physical sciences,"—I again quote Sir Humphrey Davy, "there are much greater obstacles in overcoming old errors, than in discovering new truths—the mind in the first case being fettered; in the last, perfectly free in its progress."

"To say that any class of opinions shall not be impugned—that their truth shall not be called in question, is at once to declare that these opinions are infallible, and that their authors cannot err. What can be more egregiously absurd and presumptuous? It is fixing bounds to human knowledge, and saying men cannot learn by experience—that they can never be wiser in future, than they are to-day. The vanity and folly of this, is sufficiently evinced by the history of religion and philosophy. Great changes have taken place in both, and what our

ancestors considered indisputable truths, their posterity discovered to be gross errors. To continue the work of improvement no dogmas, however plausible, ought to be protected from investigation."

In the early history of every people, we find the priest exercising the functions of the physician.—Looking upon the throes of disease as the workings of devils, his resource was prayer and exorcism; the maniac and epileptic were termed by him demoniacs, and when a cure was accomplished, the demon was said to be cast out.—Even now, the traces of clerical influence on our art are not extinct in England; for though our churchmen have long ceased to arrogate to themselves the exclusive right, as well as the exclusive power of healing, an Archbishop of Canterbury is still permitted, by the laws of his country, to confer degrees in physic! nor does he fail even in these days to avail himself occasionally of the prerogative. We will not now enter upon a consideration of the numerous theories and systems that have alternately flourished and fallen since medicine ceased to be practiced solely by the priesthood. We may nevertheless mention a few of the notions that have among others influenced for a time the treatment of disease. Every kind of disorder was, at one period, supposed to be a humour to be expelled by purgation, sweating &c.; then it took the successive forms of an acrimony to be blunted by sweeteners and temperants; a crudity to be solved by diluents; an acidity to be chemically neutralized; a putridity to be conquered by antiseptics. The greater number of the moderns look upon it as the result of a mysterious process, which they term "inflammation," and which process, according to them, can only be subdued by leech or lancet. Practitioners of all ages speak of disease as if it were an entity or essence—a noxious something to be removed or eliminated from the body. The terms "eradication," "extirpation," &c.—would lead us to doubt whether the most eminent professors of the present day hold any other opinion. Be this as it may, we shall in the sequel find

that the most perfect *unity* or *identity* pervades all morbid action, whatever be its cause or characteristic.—" The comprehensive understanding," says Sir James Mac Intosh, " discovers the *identity* of facts which *seem dissimilar*, and binds together into a system, the most apparently unconnected, and unlike results of experience :"—and in the same spirit, Lord Bacon observes, " Divisions only give us the husks and outer parts of a science, while they allow the juice and kernel to escape in the splitting."—From this, we may be satisfied of the utter vanity and nothingness of the many disputes that occur in practice, whether disorders resembling each other, and amenable to the same treatment, should be called by one name or another. In the language of Hobbes, " words are wise men's counters,—they do but reckon by them, but they are the money of fools, that value them by the authority of an Aristotle, a Cicero a Thomas Aquinas, or any other doctor whatsoever."

We are told by the ingenious John Brown that he " *wasted* more than twenty years in learning, teaching and diligently scrutinizing every part of medicine. The first five passed away in hearing others, studying what he had heard, implicitly believing it, and entering upon the possession as a rich and valuable inheritance. His mode of employment the next five years was to explain more clearly the several particulars, to refine and give them a nicer polish. During the next equal space of time, because *no part* of it had succeeded to his mind, he became cold upon the subject, and with many eminent men, even with the vulgar themselves, began to deplore the healing art as altogether uncertain and incomprehensible. All this time passed away without the acquisition of any advantage, and of that which of all things is most agreeable to the mind, the light of truth—and so great, so precious a portion of the fading and short-lived age of man was lost. It was only betwixt the fifteenth and twentieth year of his studies that, like a traveller in an unknown country, wandering in the shade of night, after

losing every trace of his road, a very obscure gleam of light like that of the first break of day, dawned upon him."

In the course of my professional career, it was my fortune to be more early staggered with the inadequacy of "received doctrines," either to explain disease or cure it. I therefore determined to read anew the Book of Nature rather than trust any longer to the reports of the Commentators. To this investigation I came with a different spirit from that with which I entered the schools of physic. In my noviciate I yielded implicit faith to my teachers. In my later researches after truth, I had to guard myself as much against a too rigorous scepticism of their facts, as a too great contempt of their opinions. I can say with Lord Bolingbroke, "few men have consulted others, both the living and the dead, with less presumption and in a greater spirit of docility than I have done; and the more I have consulted, the less I have found of that inward conviction on which a mind that is not absolutely implicit can rest. I thought, for a time, that this must be my fault; I distrusted myself, not my teachers—men of the greatest name, *ancient* and *modern;* but I found at last it was safer to trust myself than them, and to proceed by the light of my own understanding than to wander after these *ignes fatui* of philosophy."

After diligently scrutinizing nature in this spirit, I have at last been enabled to place before the profession and the public a Doctrine of Disease, which, when its novelty shall have ceased to startle, will, from its simplicity and universality of application, not I hope unfavourably, contrast with the chaos of contradiction which professors have so long imposed upon themselves and the world, in lieu of true medical science.

The most perfect system has ever been allowed to be that which can reconcile and bring together the greatest number of facts that can come within the sphere of the subject. In this consists the sole glory of Newton, whose discovery rests upon no higher order of proof. How was this discovery received on its first appearance? In the

words of Dr. Chalmers, "Authority scowled upon it, and Taste was disgusted by it, and Fashion was ashamed of it; and all the beauteous speculation of former days was cruelly broken up by this new announcement of the better philosophy, and scattered like the fragments of an aerial vision over which the past generations of the world had been slumbering their profound and their pleasing reverie." For upwards of ten centuries had the false philosophy of Aristotle enslaved the minds of civilized Europe, thus at last to perish and pass away!—So that time itself is no sure test of a doctrine, nor ages of ignorance any standard by which to measure a system. To nature, eternal nature, must Truth ever make her first and last appeal. By this, and this only, am I willing that the new fabric of medicine which I have presumed to rear upon the ruins and reveries of the past, should be tested and tried. Till the world shall detect one real, one indubitable fact militating against the truth of the Views I am now about to develope, let not innovation be charged against me as a crime. Hippocrates, Galen, Boerhave, Cullen, were all innovators in their day—nay more—revolutionists in medicine. The revolution I now meditate, unlike those of some of my predecessors, is at least free from the imputation of being sanguinary in its character.

More than twenty-three centuries have elapsed since Hippocrates distinctly enunciated the unity of morbid action. His words are: "the type of all disease is *one* and *identical.*" What Johnson said of poets then, is equally applicable to physicians: "The first, whoever they be, must take their sentiments and descriptions immediately from knowledge—their descriptions are verified by every eye, and their sentiments acknowledged by every breast. Those whom their fame invites to the same studies copy partly them and partly nature, till the books of one age gain such authority as to stand in the place of nature to another; and imitation, always deviating a little, becomes at last capricious and casual." It is in this manner that the descriptions of disease in our nosological systems have

become a mere tissue of unnatural division, not to say of the most obvious contradiction; if the words in which they be conveyed have, in many instances, any meaning at all. What, then, shall we say of reasoning founded upon facts which are no facts—upon mere assumptions which have no foundation in nature!

The schools of Egypt and Arabia, the eminent men of Greece and Rome, the great anatomical teachers and philosophers of the middle ages knew not the circulation of the blood. How wild were their theories, how fanciful their hypotheses, may be gleaned from the fact of their naming certain blood-vessels, *arteries*, or *air*-vessels; —tubes which you have only to wound, to see them pour out the living current in jets, were for ages supposed to contain not blood, but air! What innumerable fallacies must have entered into reasoning founded on such premises! Yet it was not till the seventeenth century that the illustrious Harvey demonstrated the true nature of the arteries, and the manner in which the blood circulates through the body. The more immediate reward of his discovery was calumny, misrepresentation and loss of his professional practice. The same College of Physicians who, in after years, opposed the improvements of Montague and Jenner, made the circulation of the blood the subject of their bitterest satire. Its propounder, they termed in derision the "Circulator," a word, in its original Latin, signifying *Quack*, and rivals in practice, the more vile and venal of his medical brethren made it a pretext for declining to meet him in consultation. He lived, nevertheless, to neutralize the malice of his enemies, and to become the successive physician of two monarchs, the first James and the martyr Charles.

The more you explain and facilitate the attainment of any science, the more that science is found to approach perfection. The true philosopher has always studied to find out relations and resemblances in nature, thus simplifying the apparently wonderful;—the schools, on the contrary, have as invariably endeavoured to draw fine-spun distinctions, the more effectually to perplex and

make the most simple things difficult of access. "In universities and colleges," says Lord Bacon, " men's studies are almost confined to certain authors, from which if any dissenteth or propoundeth matter of redargution, it is enough to make him thought a person turbulent." Any exposition of the singleness of principle which pervades a particular science will be sure to meet the censure of schools and colleges; nor will their disciples always forgive you for making that easy which they themselves, after years of study, have declared to be incomprehensible. So true it is, that " in the intellectual as in the physical, men grasp you firmly and tenaciously by the hand, creeping close at your side step by step while you lead them into darkness; but when you lead them into sudden light, they start and quit you!"—*W. S. Landor.*

We now, Gentlemen, come to the more immediate business of the course.

Man, who in those higher powers of reflection, combination and direction which we term *intellect* or *mind,* stands preeminent above all other animals, is yet so far as regards the more immediate perception of things around him excelled in some respects by many. The eagle has a finer and farther sight; the hearing of the mole is more acute; the dog and the vulture distinguish odours wholly inappreciable by him: not a few of the wilder denizens of the forest have even a keener sense of taste and touch. Corporeally then, the beasts of the field in some things are permitted to surpass him;—while the sagacity of the elephant, the foresight of the ant, and the social and building habits of the beaver declare to him, however unpleasing the announcement, that his great superiority over them consists solely in the possession of a higher degree of mental medium, the rudiments of which, variously developed, may be detected in numerous links of the great chain of animated beings, of which he is the head. To all of these too, both in external and internal configuration, he has many features of relationship; nor let him spurn even the meanest and most

shapeless as beneath his notice—for of every organic production of their common Maker, man while yet in the womb of his parent, has been the type!—his fœtal form successively partaking of the nature of the vegetable, worm, fish and reptile, and rapidly traversing still higher gradations in the scale of organized existence to burst at last upon the view in all the fullness and fairness of his infantile lineaments. Like theirs, his body built up from the external world, grows, decays and dies. When injured in any of its parts, it has similar powers of repair and reproduction;—but why such powers should be greater the farther we descend in the scale, is one of the many mysteries which science has not yet unravelled. Who is so ignorant as not to know that in the very lowest tribes, such as the crab and lobster, whole limbs may be severed and reproduced?—the worm may even be regenerated in half its body—while in man, the highest of the chain, only limited portions of a tissue can be materially injured and recover. Disease, like death, is the lot of all.

To understand aright the various phases which disease assumes, we must first, Gentlemen, make you acquainted with the phenomena of health, technically termed physiology. Can this be learned from *vivisection*, from cruel experiments on animals, whose various functions must all be more or less disordered by their dying agonies? Study rather the habitudes of living man in his separate and conjoint relations, and you will have little difficulty in comprehending the true motions of the body in

HEALTH.

In this state, an equable and medium temperature prevails throughout the frame. The voluntary and other muscles obey with alacrity the several necessities that call them into action. The mind neither sinks nor rises but upon great emergencies; the respiration, easy and continuous, requires no hurried effort, no lengthened sigh. The heart is equal in its beats, and not easily disturbed; the appetite moderate and uniform. At their appointed time and occasion, the various secreting organs perform

their office. The structures of the body, so far as bulk is concerned, remain to appearance, though not in reality, unchanged; their possessor being neither cumbered with obesity, nor wasted to a shadow. His sensorium is neither painfully acute, nor morbidly apathetic. He preserves in this instance, as in every other, a happy moderation. His sleep is tranquil, dreamless.

If we analyze these various phenomena, we shall find them all to consist in a series of alternate motions—motions for the fulfilment of which, various spaces of time are requisite;—some being diurnal, some returning in a greater or lesser number of hours, while others are in constant or momentary succession. In the morning, man rises to his labour; he returns at night to repose in sleep. Again he wakes to labour, then "steeps his senses in forgetfulness" once more. His food and drink, nutritious one hour, become excrementitious the next; every appetite and necessity periodically alternating. His lungs now inspire air, now expel it—his heart successively dilates and contracts—his blood brightens into crimson in the arterial circle of its vessels, again to darken and assume the hue of modena in the veins. The female partner of his lot,—she who shares with him the succession of petty joys and sorrows, hopes and fears which make up the day-dream of life,—has yet another revolution—the *catamenial;* and the process by which she brings their mutual offspring into the world—*parturition* is a series of pains and remissions.

Every particle of the material body is constantly undergoing a revolution or alternation;—fluid one hour, it becomes solid the next, again to pass into the fluid state; and ever and anon varying its properties, colours and combinations, as in brief but regular succession it assumes the nature of every organ, tissue and secretion, entering into, and proceeding from, the corporeal frame. "It is every thing by turns, and nothing long."

Those who ascribe the source of animal heat exclusively to the motion of the lungs have forgotten this fact — they have forgotten that in the constant mutation of its atoms, every organ, nay, every par-

ticle of that organ being ever in motion, must equally contribute to this end. For, according to the universally admitted axiom in physics, there can be no motion in matter *without change of temperature*, and no change of temperature *without motion in matter*. To this common law of inorganic change, every change in our body is subjected. Electricity, chemical force, and gravitation, are the relations in which the subject may be viewed—attraction and repulsion explain at least the manner in which the fluid matter of the blood having first assumed the solid consistence of an organ passes again into the fluidity of secretion. *From* the earth and *to* the earth, the matter composing our bodies comes and goes many times even in the brief space of our mortal existence. In this the human system resembles a great city, the inhabitants of which, in the course of years, are constantly changing;—while the same city, like the body, shews no other outward appearances of change than what relates to the periods of its rise, progress, maturity or tendency to decay.

SLEEP.

The last and most important of the revolutions constituting health, is the state of SLEEP. Philosophers of all ages have made this an object of their most anxious study—its relation to death perhaps being their chief inducement to do so. "Half our days," says Sir Thomas Browne, "we pass in the shadow of the earth; and the *brother of death* extracteth a third part of our lives." In the state of perfect sleep the iris will not contract on the approach of light—the skin has no feeling—the ear no sense of hearing—the taste and the smell are not to be roused by any of the ordinary stimuli. What is this but a *periodic death*—a palsy or cessation of internal motion in those nerves by which we maintain a consciousness of existence, and perceive our relationship with the world around us? Broken sleep consists either in brief remissions of the whole sleeping state, or in a wakefulness of one or more of the five senses. There are individuals, for example, who sleep with open eyes, and who would see

you, were you to enter their chamber with the most noiseless tread. These tell you that they are always *half awake.* In the condition of body termed *nightmare,* there is a consciousness of existence with a wakefulness of the nerves of sight or feeling; but with a total inability to influence the voluntary muscles by any effort of the will. The subject of it can neither speak nor turn himself. The dreamer, portions of whose brain think, and consequently move, is partially awake. The somnambulist and sleep-talker are dreamers, who having portions of the brain in a state of action, and others torpid, perform exploits of deed and word that bring you amind of the maniac, whose powers of judgment are defective. A man may be entirely awake, with the exception of a single member; and this we still refer to a torpid state of some portion of the brain: such a man will tell you that his arm or leg is *asleep* or *dead.*

While talking over this subject with a medical friend, he related to me the following anecdote: One night, during his sojourn in the East Indies, on suddenly waking from a rather restless sleep, his hand touched a cold animal body, which his fears immediately magnified into a cobra copel. He called out accordingly as lustily as he could, "a snake! a snake!"—but when his servants appeared, he found he had mistaken his own sleeping arm for this most unwelcome of oriental intruders!

The human body in health is never asleep throughout; no,—the heart still beats, the lungs perform their office, and circulation, digestion, and other lesser motions of organic life proceed as in the waking state. The more important motions of the heart and lungs could not cease for many minutes without endangering the entire life in the higher animals; though these organs in the bat, dormouse and snake appear to remain inactive for months. The state termed *faint,* it is true, comprehends, even in man, a temporary palsy or death of the whole body; but such state prolonged to a very brief period, in most instances, passes into death perpetual. Catalepsy, or trance, has so great a relation to death, as to have been frequently mistaken for it. The subject of this condition of body, by something

like the same inexplicable power which enables the dormouse to hybernate, may remain apparently dead for days and yet recover. But the motions and cessations of motion which we have just now been considering, are not conditions of the healthy state; they are disorders,—and this leads us to enter upon the various phenomena which obtain the name of

DISEASE.

Disease, Gentlemen, is neither a devil to cast out, a humour to be expelled, nor an acrimony to be blunted; neither is it an acidity to be neutralized, nor a crudity or putridity to be resolved. It is an error of action,—a greater or less variation in the motion, rest, and revolutions of the different parts of the body;—reducible, like those of health, into a systematic series of alternations, in the course of which the matter of a structure occasionally alters its original character and chemical relations—so much so, in some cases, as to become even completely decomposed and disorganized.

We shall first speak of the more simple deviations from health. Whatever be the cause or causes of corporeal aberration, the first complaint of the patient is of partial or general heat or cold. The muscles, less under the controul of their respective influences, become tremulous, spasmodic; or wearied, palsied, the functions of particular muscles cease. The breathing is hurried on slight exertion; or it is maintained slowly and at intervals, and with a long occasional inspiration, (familiar to you in the act of sighing) that scarcely makes up for interrupted pulmonary action. The heart is quick, palpitating; or languid, or remittent in its beats; the appetite craving, capricious, or lost. The secretions are either hurried or increased in quantity; or sluggish, or suppressed. The body shows a partial or general waste; or becomes, in part or in whole, preternaturally tumid and bloated. Alive to the slightest stimulus, the patient is easily impassioned or depressed—his mind comprehending, in its various relations, every shade of unreasonable sadness or gaiety, prodigality or

cupidity, vacillation or pertinacity, suspicious caution or too confident security; with every colour of imagination, from highly intellectual conception to the dream-like vagaries and reveries of hallucination. His sensations are perceptibly diminished or increased. Light and sound, for example, confuse or distract him; like the soft Sybarite, a rose leaf ruffles him. With the smallest increase in the medium temperature of the atmosphere, he becomes hot and uncomfortable, and the slightest breeze shivers and discomposes him: or, as you may sometimes observe in the case of extreme age and idiotcy, he becomes equally insensible to excess of light, sound, heat and cold.

Gentlemen, contrast, if you please, these simpler forms of disease with what we have said of health, and you will at a glance perceive that the difference betwixt the two states consists in mere variation of the sum or amount of particular corporeal motions, and in a difference of effect of external agency on the matter and functions of the body. Structural lesion, or tendency to decomposition of any part of the frame, so frequently but erroneously associated with disease as a cause, is not even necessary to the production of disorder; nor is it an element always entering into fatal result. It is a phenomenon which may or may not arise out of general constitutional change, according to particular habits and predispositions. By predisposition, I mean the readiness or fitness of one part of the body more than another to be acted upon by influences from without,—occasioned doubtless by a weakness in the cohesion or attraction of its atoms to each other. We have all, gentlemen, our particular predispositions.

What are the causes of disease?

CAUSES.

The causes of disease are infinite: they comprise every thing that connects us, directly or indirectly, with the external world, which act upon us, in the first place, through the different modifications of nervous perception. The causes of disease never originate in any one organ of the body, except in so far as that organ is predisposed by an

inherent weakness of attraction of its parts, to receive grave impressions from agencies that affect other parts of the same body in a slighter manner. "I conceive (with Hobbes) that nothing taketh beginning from itself, but from the action of some immediate agent *without* itself." Modern schools preach a different doctrine.

The too exclusive spirit with which professors have urged the necessity of investigating the bodies of the dead, not in England only, but throughout Europe, has given rise to a class of medical materialists, who hoping to find the origin of every disease made manifest by the scalpel, are ever mistaking effects for causes. Loth to believe that death may take place without even a palpable lesion of structure, these individuals direct their entire attention to the minutiæ of the dead; and finding in their search some petty enlargement, some trifling ulceration, or it may be, some formidable tumour or abscess, hastily set this down as the first cause of a disease of which it was only a development.

"The great error of these localisms of disease," says Dr. Uwins, "is to put consequence for cause, incident for source, change in the condition of bloodvessels for *powers producing* such change. It is an error which has its origin in the blood and filth of the dissecting room, and which tends to degrade medicine from the dignity of a science to the mere details of an art."

I do not know that medicine has gained anything of practical utility at the hands of anatomical professors. The greater number of their pupils have been sceptics in physic—and no wonder, since they have been so constantly accustomed to hear, *ex cathedra*, that Anatomy is the foundation of all medical science; when in reality, as we shall shortly show you, it can assist us but little in the treatment of the sick. Sydenham, whose descriptions of disease have justly earned for him the title of the English Hippocrates, held anatomy so cheap as to say, "it was a fit study for painters." He might have added, and also for surgeons. The course of study prescribed by the schools of the present day tends to make young men

anatomical mechanics, but nothing more. These leave the universities not only with a contempt for physic, but without a single idea of the true action of medicines upon the living system; and yet to these chiefly are entrusted the treatment of diseases, for which all their previous attainments cannot, in the slightest degree, avail them. No wonder they cut such wretched figures when examined as witnesses in our courts of law, or that their evidence should, in most instances, be looked upon both by Bench and Bar as a tissue of incoherency and inconsistency throughout. Look at the ridiculous manner in which they commit themselves when examined in cases of lunacy. Opinions they certainly give, but these tend more to embarrass than to enlighten. In the case of an Inquest, their minds can never get beyond the appearances of a *post mortem* examination. In their daily practice, even they still look to the results of this as the proof of their discrimination. Strange, that their too numerous opportunities of doing so, should not have long ago opened their eyes to their paucity of resource for the ailments of the living! So great and universal has become the prevalent delusion upon the subject of dissection, that some of the most eminent and intellectual of our senators share in it. In a recent speech from his place in the House of Peers, Lord Brougham is reported to have said, "The *only good* medical education is to be got in the dissecting room." Heberden, with infinitely more knowledge of the subject than his Lordship, was wont to say that the best schools for medicine were an apothecary's shop and a London hospital. In the one, the student could make himself acquainted with the external properties, appearances, and doses of medicinal agents; in the other, he had an opportunity, at least, to observe not only the shades and variations which Disease assumes, but the effect, for good or for evil, of his medicines upon the living body. *Medecina non agit in cadaver* is a maxim as old as physic. But seriously, what do those who have so exalted dissection, as to call it by a self-evident misnomer, *Pathology*, tell us has been the result of their labours? They refer,

doubtless, to an infinity of changes of organ and tissue, and learnedly enter upon a detail of each; but the only advantages that these have hitherto contributed to the healing art, may be happily, or rather *unhappily*, summed up in the two lines of Gray:

> "Rich windows, that—*exclude* the light,
> And passages that lead to—*nothing*."

What discoveries has half a century of "Pathological" research presented to the expectant world?—Truly we hear of a great many:—but lungs decomposed, livers enlarged, bone, muscle, and viscus in various stages of corruption, would seem to comprise the whole. These nevertheless, are what the pathological professor exultingly calls "beautiful specimens," "superb collections;"—pointing them out at the same time to his credulous pupils as the trophies of science, when he might better describe them as the triumphs of death and disease, over the misapplication or real deficiency of his own medical resource. What has the most patient study of these done for physic? Has it given us one new remedy, or told us better to use our old? Where were the virtues of bark and arsenic discovered?—In the dead-house?—no certainly;—the one we owe to a Peruvian peasant who cured himself of the ague by it.—What had anatomy to do with that? For the other, we may thank the Indian Brahamins, who hold the dissecting-room in horror. Antimony, rhubarb, opium,—whence got we our knowledge of these?—From the quack and the old woman—individuals who will ever successfully compete with physicians, while the latter busy themselves with dead bodies to the neglect of the powers and principles that affect the living. "A cripple in the right way, (says Lord Bacon) will beat a racer in the wrong."—So great a stumbling-block, to a proper knowlege of medicine, has been this exclusive and too minute attention to morbid dissection that Dr. Baillie its greatest patron confessed, on retiring from practice, his total want of faith in physic

—in other words, he admitted his entire ignorance of the principles of a profession, by which he had amassed a fortune! The experience of his whole life, was equally a satire on morbid anatomy, and the value too often attaching to medical reputation. So true is Johnson's remark, that "a physician in a great city seems to be the mere plaything of fortune; his degree of reputation, is for the most part, totally casual: they that employ him, know not his excellence—they that reject him, know not his deficiency. By an acute observer, who had looked upon the transactions of the medical world, for half a century, a very curious book might be written on the fortunes of physicians."

To return to the Causes of disease. We have already said these are infinite—the earth, the air, the degrees of temperature, dryness and moisture of each; the nature and extent of our food and drink, with all the other changes and chances of our social and individual position;—these are the elements to which we must look not only for the causes of disorder, but for the causes of health itself.

Having alluded to the great error of the "Pathological school," we may now glance at the doctrines of another class of exclusives—those who, with the quantity or quality of our food or air, associate every disorder. The late Mr. Abernethy, to whom science nevertheless owes much, was an example of the first. To the stomach and bowels, he almost invariably pointed as the cause of every disturbance. He forgot his own observation, that a passion or a blow could alter the secretions of both. He ascribed the first link in the chain of causes to a feature, which could only be improved by an agent affecting the nervous or perceptive system, in which that and every other symptom could alone have their origin.

But what shall we say of those who attribute every disorder in which remittency of symptom takes place, to *marsh-miasma* or *malaria*; when, as we shall shortly shew, every disease which has obtained a name, may not only admit of this phenomenon, but that few or none by what-

ever caused or characterized, are without their remissions or intermissions, all more or less periodic and perfect. Man is not an isolated being; without air and food he cannot exist,—and partial deprivation, or depravity of either, will give rise to almost every affection to which he is liable; but his success in life, his reception from friend or foe, the state of his family or finances,will equally periodically excite, depress and disorder his various organs and functions, as a deprivation or depravity of the food he eats, or the air he breathes. An unexpected reverse of fortune, good or bad may lay the foundation of a thousand miseries; nay, examples are on record where individuals have instantly expired from intensity of sudden joy. Of sudden grief, many have been the victims.

"It has been too much the fashion in philosophy," says Sir Humphrey Davy, "to refer operations, and effects to *single* agencies, but there are in fact, in nature *two* grand species of relationship between phenomena; in one, an infinite *variety of effects* is produced by a single cause; in the other, a great variety of causes is subservient to *one effect.*"

This observation applies with particular force to every thing pertaining both to the causes of disease, and its cure. The single agency of thermal change, for example, has given rise to cough, catarrh, rheumatism, dropsy and a host of other disorders in one class of individuals; while in another class, to call forth any one of such states, it would require the united influence of intemperance, domestic trouble and deprivation of food, in addition to that thermal change which of itself singly produced all these diseases in the former. Physicians are in the habit of dividing diseases into two classes, namely, *constitutional* and *local,* and treating them as such accordingly; but properly speaking, there never was a purely local disease. You will, doubtless ask me if toothache, consumption, and ulcers, are not local diseases? So far from this, it is impossible for such states to take place, (unless produced by outward injury,) without the previous condition of entire constitutional disturbance, of which instead of being causes, as many sup-

pose and teach, they are only effects or features. Let the physician recur to nature, he will find that the subjects of all laboured under a general derangement of the whole habit, previously to the development of the local lesions, from which these diseases took their designations. Now, some will call this disturbance by one name, and some another; for myself, I am satisfied with the phrase, "loss of health," but as many of you, Gentlemen, may not be content without a medical term, I will call it to please you, FEVER—and as periods of comparative ease are enjoyed by the subjects of all these diseases, I will go further and call it REMITTENT FEVER. Yes, Gentlemen, all diseases have remissions, and "this," says John Hunter, "is an attribute belonging to life, and shows that life cannot go on the same continually, but must have its hours of rest, and hours of action." Human Life at best is in Shakespear's language, "a *fitful* fever," and the design of these lectures is to prove

INTERMITTENT FEVER THE TYPE OF ALL DISEASE.

That a beautiful continuity of feature may be traced throughout the numerous varieties of animal life, forming a bond or type to unite them together, is proved by the researches of many eminent men. To the discovery of this universal type of organization, Comparative Anatomy owes its elevation to the dignity of a science. A similar primitive type of unity will be found to prevail throughout all the various changes which we recognize as morbid in man. "The model of all diseases," says Hippocrates, "is one and the same; the difference of place makes the only difference,"—and again he remarks "all diseases have a resemblance in their form, invasion, march and decline." Far from being a fanciful analogy, this similitude when rigidly scrutinized, will be found to resolve itself into a perfect unity of symptom; one man's disease differing from that of another in constitutional shade or degree only; or in the mere difference of locality, or tissue which shall shew the greatest tendency to decomposition in its course.

The human body, whether in health or disease, is an epitome of every great system in nature. Like the globe we inhabit, it has in health its diurnal and other revolutions, its sun and shade, its times and seasons, its alternations of heat and moisture. In disease, we recognize the same long chills and droughts, the same passionate storms and out-pourings of the streams, by which the earth at times is agitated;—the matter of the body assuming in the course of these various alternations changes of character and composition, such as tumors, abscesses and eruptions, typical of new formed mountain masses, earthquakes and volcanos. All these too, like the tempests and hurricanes of nature, intermitting with longer or shorter periods of tranquillity, till the wearied body either regains like our common mother, its wonted harmony of motions; or, like what we may conceive of a world destroyed, becomes resolved into its pristine elements.

In the language of the schools, the phases of disease are termed the *paroxysm* and *remission*—the first being synonymous with exacerbation, throe, fit;—the second meaning the period of comparative freedom from disorder. So far however from having been recognized as a law of universal occurrence, and harmonizing with everything which we know of our own or other worlds, periodic return has been vaguely supposed to stamp the disorders where it was too striking to be overlooked, as the exclusive offspring of a malarious or miasmatic atmosphere.

Yes, Gentlemen, for the better part of a century, this marsh-miasma, if it be not indeed a phantom, was the constant associate of periodic disease. Of that, and that only, was every periodic disorder imagined to be, under every circumstance, the effect; and the word AGUE, synonimous with intermittent fever, is the phrase which popularly embraces all affections where the patients have chills and heats, with periodic exemption, of greater or less duration, from both. But, as we have already hinted, we shall in the sequel establish that no disorder, however named, or by whatever caused, is deficient in any of these respects—there being, in a word, no morbid state which does

not exhibit remissions and paroxysms more or less periodic in its course. If we shall further demonstrate that the remedies most influential in the treatment of disease generally come at last to the agents of greatest acknowledged virtue in ague, you must admit, that in this disorder we have discovered the type that pervades, and the bond that associates together, every shade and shape that Disease can assume.

You will naturally ask, Gentlemen, what substances be these? The profession will answer, and rightly answer, Bark, or its better substitute, Quinine—in fact, its essence, Arsenic and Opium; to which you will permit me to add, Hydrocyanic or Prussic acid, Iron, Silver, Copper, Strychnia, Musk, Valerian, Colchicum or Veratria, &c. These medicines, from the relation which their influence bears to *time* or period, and *temperature* or heat, I term CHRONO-THERMAL; and I have placed them in the order of usefulness which they appear to me to warrant. But as some of you, like many *out* of the profession and not a few *in* it, may be sceptical in regard to the power of Physic, I may perhaps be permitted to make a slight digression in its favour here.

When a young friend of mine, a barrister of more wit than wisdom, chose, one day while conversing with me upon this subject, to ridicule the idea of putting little bits of pounded stick and stone into a man's stomach, to cure any disease, my answer was, 'Well, you will surely admit that bits of pounded stick and stone may kill you? If you do not, you must be ready to swallow hemlock and arsenic in any quantity required.' To this the man of law put in a *demurrer;* in fact, he was fairly puzzled as to the killing part, at least; and so I thought it time to explain to him, as I now do to you, what I never yet learned from either book or lecture, that the principle upon which these substances can cure or kill is ONE and the SAME; namely,—the capability which they have for good or for evil, as the case may be, *galvanically* to change the existing temperature, and consequent motion, or *vice versa*, of certain parts of the body. Yes, Gentlemen, turn over the records of the profession,

and mark well the remedies upon which authors dilate as being most beneficial in any form of disease; you will find them to be one and all agents having either the power of *preserving* or *controlling* temperature,—of exalting or depressing this in the stages of exacerbation, or of continuing and prolonging the more healthy and moderate degrees of it, characteristic of the period of remission.

For this latter indication, the most generally efficient of all remedies is the Bark, or Quinine; but it is not specific, nor is there such a thing as a Specific, for this or any other purpose, in physic;—arsenic, opium, hydrocyanic acid, all proving better or worse than another in particular cases of disease; and this less with reference to the disorder and its cause, than to the constitution or peculiarity of system of individual patients. Upon the action of these and all other remedies, we shall enter at length at a more advanced period of the course. We shall commence our next lecture with a consideration of the phenomena of AGUE, and shew you its relation to Spasmodic disease,—Asthma, Epilepsy,—to Palsy, Curved Spine, Squint, and Apoplexy. These disorders we shall prove are merely developments occurring in its course,—*analytically*, by anatomising their symptoms; *synthetically*, by cases of each cured on CHRONO-THERMAL principles.

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LECTURE II.

FALLACIES OF THE FACULTY,

BEING THE SPIRIT OF THE

CHRONO-THERMAL SYSTEM.

BY

SAMUEL DICKSON, M.D.

FORMERLY A MEDICAL OFFICER ON THE STAFF.

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FALLACIES OF THE FACULTY.

LECTURE II.

AGUE—MANIA—SPASMODIC AND PARALYTIC DISEASE—APOPLEXY—DISORDERS OF SENSATION.

In our former Lecture, Gentlemen, you will remember that, after a brief allusion to a few of the many errors which, from time to time, have prevailed in the schools, we took a more simple, though, at the same time, a much more bold and sweeping view of the subject of Medicine than would appear to have hitherto come within the grasp of teachers and professors. The nature of Health and Sleep, of Death and Disease, we in some measure explained;—and we proposed, as matter for future argumentation, that INTERMITTENT FEVER OF AGUE is the *germ* or *type* of all the maladies to which man is liable,—referring, at the same time, to certain natural analogies in the world around us; and hazarding the statement, (which until we prove, we by no means wish you to take for granted) that the chrono-thermal or ague-medicines are the most generally influential in the treatment of every kind of disease. Let it not, however, be supposed that in our high estimate of this particular class of remedies, we reject, in practice, any earthly or other agent which God has given us; for there is no substance in nature which may not be turned to good account by the wise and judicious physician. Besides the chrono-thermal remedies, which we chiefly use as remedies of *prevention*, we possess a multitude of powers which have all more or less influence upon the human body, both in health and disease; and though few or no substances can act upon any part of the frame without implicating every other part, yet do we find that certain medicines have relations of affinity to particular organs of the body greater than to others—some affecting

one organ, some another. Of this class Emetics and Purgatives, as (their names import,) Mercury, Creosote, Cantharides, and the various Gums and Balsams, are the principal: Iodine, Lead, the Earths and Acids are also examples. But while, in the more simple cases of disease, the chrono-thermal medicines, singly, will answer every purpose;—with alternations and combinations of both classes, particular cases of disorder will be more efficiently treated than by the exhibition of either simply. Of the action of remedies of every kind, we shall speak more particularly when we come to treat of individual substances. For the present, we shall content ourselves with repeating what we stated in our former lecture, in connection with this subject, that the action of REMEDY and CAUSE, in every case, comes at last to the common principle of their capacity *galvanically* to affect temperature or motion—change in one never taking place without change in the other. It will be a subject of gratification to pursue DISEASE through all its modifications and varieties, step by step, and to show you the source and the extent of our influence over it,—for which purpose we shall call our different witnesses before you in the shape of Cases,—taking these, as often as possible, from the experience of others, and when this fails us, from the results of our own practice; *leaving to you*, of course, to compare and cross-examine these last at your leisure, with such facts and cases of a similar description, as may come before you during your attendance at the various hospitals with which you are respectively connected. Of this we feel assured, that whether or not you pronounce a verdict in our favour upon all Counts, you will at least admit that we have compelled you to alter your sentiments most materially upon many measures which you previously supposed to be as unquestionable in practice as they were orthodox in precept. But if, according to Lord Bacon, "disciples do owe unto masters only a *temporary* belief, and a *suspension* of their own judgment *until they be fully instructed*, and not an absolute resignation or perpetual captivity," you will not be sorry to escape from the thraldom of men

who, when asked for bread, gave you a substance which, in the darkness of your ignorance, you could not by any possibility tell was a stone! No longer mocked by mystic gibberish, you will now take your places as judges of the very doctrines you formerly, as pupils, implicitly and without examination believed; and according to the evidence which I shall bring before you, you will pronounce between your teachers and me—whether the infinity of distinctions and differences, upon which they so pride themselves, be founded in nature and reason,—or whether "all things do by *scale* ascend to UNITY, so then, always that knowledge is worthiest which is charged with least multiplicity."* Having now stated our case, we shall proceed to the proof, and *first* as to AGUE, being the type of unity of all disorder.

AGUE.

The ague-patient, among other sensations and changes, successively experiences a *chill*, *heat*, and *sweat*,—which three stages constitute the PAROXYSM, or fit. He has then a comparative state of health, lasting for one or more days, before the recurrence of a similar fit, which generally makes its approach at the same hour of the clock as the former, and is followed again by a REMISSION of the symptoms, of equal length as before. During the paroxysm, every function of the body is more or less disturbed,—the ascertainable temperature being one hour deficient; another, raised above the healthy standard. The muscles become tremulous or spasmodic, the secretions increased or decreased, the senses, appetite, and mental powers depressed, vitiated, or even preternaturally exalted —nay, gentlemen, during the paroxysm of ague the sight even of the blind has been known to be restored, and deaf and dumb persons have also recovered their hearing and speech while it lasted. Though mental depression is the more general effect of the disease, a gentleman who was recently my patient informed me, that during the cold stage, his intellectual powers were more than usually clear,

* Bacon.

and his sensations throughout highly pleasurable;—while authors record instances of the revival of languages long forgotten, and of poetical, musical, and other talents being exerted in the various stages—talents which had never been previously developed, and which no effort on the part of the subjects of them could again recall after the fit had passed away! The following case I take from the writings of Darwin:—

"Miss ——, aged 19, had bathed a few times, about a month before, in a cold spring, and was always much indisposed after it. She was seized with sickness and cold shuddering, with very quick pulse, which was succeeded by a violent hot fit. During the *next* cold paroxysm, she had a convulsion fit, and *after that* symptoms of INSANITY, so as to strike and bite the attendants, and to speak furious language."—Nobody, I presume, would attribute this lady's disease to *marsh-miasma;* yet here we have the great characteristics of ague—alternate cold and heat, shiver and convulsion, remission and exacerbation, with *mania* developed in the course of successive fits.

The next case, copied from one of the medical journals of the day, is somewhat similar, though arising from another and very different cause. "A young lady was about to be married to a gentleman who was accidentally killed on the evening before the morning on which the marriage was to have been solemnized. She became deranged, and was confined to a lunatic asylum. The *paroxysm* made its attack every day at the same time, and continued several hours, but *during the remainder* of the day she appeared perfectly sane." (Lancet.) In this, a case illustrative of disease from the passions, we find the most perfect *periodic* remission and exacerbation. The narrator says nothing respecting temperature, but without taking into account the impossibility of corporeal change without change of this, if you will inspect a lunatic asylum, you will find the patients, during the fit, exhibiting the particular thermal variations, constituting the type of intermittent fever. So much for the power of the passion of *grief*. That ague has been produced by

terror you will readily believe, when you consider that the effects of *fear* generally are but shades of this disorder. That disease produced by fright may become *periodic*, and like that from grief even admit of exacerbation and remission, we shall, in the course of this lecture, have occasion to show you.

A singular instance of ague from *vexation* or *rage* is noticed by Mr. Moore, in his life of Lord Byron, the subject of which was his Lordship's mother. "So sadly characteristic (Mr. M. tells us) was the close of the poor lady's life, that a fit of *Ague*, brought on, it is said, by *reading the upholsterer's bills*, was the ultimate cause of her death." How true are the words of an anonymous rhymester :—

> "There's no philosopher but sees
> That *rage* and *fear* are one disease,
> Though this may *burn* and that may *freeze*,
> They're both alike the AGUE !"

Seriously, Gentlemen, you will do well to ponder on the relations which the effects of these passions bear to that disorder; for we shall yet have occasion to shew you that not only may the passions cause, but cure intermittent fever, and almost every other disease incident to man;—proving clearly that the source of power of all agents, whether influencing the body for *good* or for *evil*, is ONE and IDENTICAL. Even the older writers had a notion of this; for in 1779, Dr. Steedman of Wells, in his work on Gout, adopted for his motto the antique maxim, "dolor est medecina doloris;"—and in the writings of Shakspeare, who drew his characters less from imagination, than from nature, you will find many illustrations of the same truth. The following is one of the most prominent:

> "In POISON there is PHYSIC, and *these news*
> Having been well, that would have made me sick,
> *Being sick* have in some measure *made me well;*
> And as the wretch whose *fever-weakened* joints
> Like strengthless hinges buckle under life,
> Impatient of his fit, breaks like a fire
> Out of his keeper's arms, even so my limbs
> *Weakened* with GRIEF, being now *enraged* with GRIEF
> *Are thrice themselves.*"——

What are the constitutional effects of *external* injury? To say nothing of the graver accidents and operations which occur in daily practice, do not all experienced surgeons tell you how often they have been compelled to witness every symptom of ague, from the simple introduction of a bougie or other blunt instrument into the bladder! The fainting-fit which occasionally follows this bloodless operation, is an extreme shade of the cold stage, and the after-fever, sometimes slight and subdued, sometimes violent and convulsive, is typical of the hot. Dr. Davis in his account of the Walcheren ague, informs us, that the paroxysm occasionally came on with a faint and a sudden debility that were really alarming. A married lady, the mother of seven children, some time ago, consulted me for fainting fits, which she had every alternate day, at the same hour. Quinine, arsenic, hydrocyanic acid, and opium having successively failed, I prescribed musk, after which she had no return. "The FEVERS (says Mr. Abernethy) produced by local disease, [local injury?] are the very identical fevers which physicians meet with, when there is no external injury." How can they be any thing else?—since it is only by the matter of the body changing its degree of temperature or motion in an identical manner in both cases that we find the groupe of symptoms, which we include under the word "fever." That the same agents are equally influential in both, is proved by the beneficial effect of cold affusion in the hot stage,—whether the cause may have been altogether inappreciable, as in the supposed case of marsh-miasma, or the disease be the palpable result of a blow or other visible injury. That the substances, moreover, which we successfully employ as *preventives* in the case of return of ague from viewless causes, will have the same effect in that produced by external injury, the following case may be adduced in proof. Shortly after having had a bougie passed, a gentleman was seized with ague, which was perfect in its stages; two days after he had a return, and every alternate day it recurred to the number of twelve paroxysms in all;—when he took *Quinine* and he had no repetition. He never had ague before this,

and never afterwards, unless when compelled to use the bougie.

The propriety of adopting any remedial measure has always more or less relation to time and temperature. But the beneficial influence of the BARK, and its preparation *quinine*, would appear more than any other agent, to depend upon the period in which we administer it. The proper period for its exhibition is during the remission of the symptoms. With the exception of opium (also most influential during *remission*) it is more strictly a *preventive* than any other known agent. So generally, indeed, has it been found to answer this purpose in the treatment of ague, that many teachers of medicine vaunt it as a specific for this distemper; but as we stated to you in our former lecture, there is no such thing as a specific in nature for any disease whatever. Had there been a specific for ague, do you think Oliver Cromwell would have been permitted to die of it? Whatever be the agency by which this or any other disease has been cured, you *will* find in the course of these lectures ample evidence that its influence relates in every case to change of temperature. Sir R— A— informed me that when serving in Portugal, he became the subject of severe ague, which resisted a host of remedies prescribed for him by numerous medical friends—bark among the number. One day when riding out, he was seized with a paroxysm. The inmate of a little shop, where he dismounted till the fit should be over, suggested to him to try the barber-surgeon of his neighbourhood. Willing to be cured by any body or by any thing, Sir R. at once agreed. The ambidexter man of medicine came, ordered him a large plaster to his back, and the ague was forthwith cured! Instructed by this fact, I have advantageously prescribed plasters in obstinate agues, as well as in numerous other cases of chronic disease. The improvement of the *temperature* of the spine under such treatment has been followed by alleviation in most cases, and a cure in many where the symptoms had previously resisted every kind of *internal* treatment.

The occurrence of Remission and Paroxysm in disease, so far from being, according to school-doctrine, exclusively connected with *miasma*, or *malaria*, as a cause, is a GENERAL if not a UNIVERSAL LAW—changes of temperature, passions, injuries being equally liable to be followed by intermittent disorders—nay, the various poisons, whether vegetable or mineral, those very agents successfully employed in the treatment of intermittent fever are no exception to the rule. Speaking of these last a living professor* observes "Some produce their effects in *paroxysms*, —for example, Strychnia and Veratria; some admit of *exacerbations* and *remissions*, namely arsenious acid [disorder from] which indeed sometimes exhibits *intermissions*." The same effects occasionally follow the administration of opium and quinine. Such substances then are strictly chrono-thermal, having all more than the generality of remedies, a greater or less relation to *time* and *temperature*, whether acting as poisons or remedies. The chills, heats and tremors which they are all capable of producing—very familiar to the medical practitioner in the case of arsenic—are the identical symptoms which we term AGUE !—the very symptoms be it observed, for which we so often successfully prescribe them in practice. The agents of death, then are indeed the agents of life,—*Similia similibus curentur*. So far the OLDER WRITERS, whether physicians, as in the example of Steedman, or poets, as in the case of Shakspeare, were in the right—and the homœopathists, by assuming to themselves the merit of the discovery of the fact, are in the wrong—and doubly so, inasmuch as at the very moment, they vaunt its truth, *they go completely counter to it, in every thing connected with practice!* Gentlemen, they say one thing and do another; and this, when we come in fitting time to examine their treatment of disease, we shall have little trouble in demonstrating to you. But so far as regards the doctrine itself, it is the Truth, but *not* the *whole Truth*, —it is only a part or portion, and this also, we shall here-

* A. T. Thomson.

after explain. Meantime, we shall request your best attention to the subject of

SPASMODIC DISEASE.

To most of you who have wives, daughters or sisters, SPASM is in some shape or other a household word. Ladies are constantly complaining of their spasms. What is the meaning of the term? It means the unnatural contraction of some muscle of the body—and in the case of the voluntary muscles, you cannot by any effort of the will, control or counteract it. By rubbing and *warming* the part, you will sometimes succeed, and there are a great many medicines, by which, when taken internally, the same effect may be produced; but what will answer in one case, will not answer in another. The disease is sometimes termed the *cramp*, the more especially if the spasm be painful. The difference of locality in which spasm takes place in different persons, has afforded professors an excellent opportunity of mystifying the whole subject. When it happens in the membranous lining of the lachrimal duct, you will see the tears accumulating at the inner angle of the eye, the passage to the nose being closed up by the contracting spasm. This disease is called *Epiphora*, and sometimes *Fistula Lachrimalis*. The *Sneeze*, *Hiccough*, and *Yawn*, are also effects of spasmodic action. Occurring in the muscular apparatus of the windpipe, or its bronchial divisions, spasm is familiar to you all in the word *Asthma*; and it is also termed *dyspnæa*, or difficult breathing, which it certainly occasions. When this irregular action of muscles is manifested about the jaws and throat, with convulsions of the face and limbs, there is usually loss of consciousness, and the patient falls down. This, Gentlemen, is the *Epilepsy* or "falling sickness." Taking place in the ilium or small gut spasm, is termed *Iliac Passion*. In the colon or large gut *Colic*; and in the urethra, *Spasmodic Stricture*. The *Lockjaw* affords yet another example of spasm. That all these various diseases are merely modifications of the same

action, is still further proved by each and all of them, having been observed to assume the most perfectly intermittent type in individual cases, and by all being more or less amenable to the same class of medicines, which have proved available in the treatment of simple ague.

MANIA AND EPILEPSY.

Has not the MANIAC in every form of hallucination his lucid intervals—his *remissions?* Of this we have already given you two examples. But your schoolmen, your "pathologists," your profound medical reasoners, speak of madness and other diseases, as if they were real essences or fixed states; they tell you they are curable or not, according to the cause; they look in the *dead* body, for the causes of a *living* action, for the origin of mania and epilepsy,—diseases which they have even themselves, perhaps, traced to cold or a passion! External agencies then were the real causes, not the structural deviations detected WITHIN, *after death* by the scalpel. Students of medicine! young men honorably ardent in the pursuit of science, for the sake of your profession, and your future patients, learn to think for yourselves. Pause, examine, before you give a slavish assent to the dicta of your teachers. When these tell you that madness is an inflammation, or that it depends upon some cerebral tumor or abscess, ask them how they reconcile lucid intervals, hours, perhaps days, of sanity and sense, with a cerebral structure, even thus partially but permanently disorganized? How can the cause of an intermittent disease be a corporeal entity or something permanently fixed—a substance, in a word, that can slumber one hour, and wake the other!—Let no sounding words, no senseless sophistry cheat you of a reply to this question.

The man who has lucid intervals is curable in many instances; the epileptic, who at any time of the day or night enjoys a freedom from convulsion, may be equally susceptible of improvement from well devised remedial means. The modern routine treatment of both being

essentially aggravant, can we wonder that these diseases are so often pronounced hopeless, or that a sceptic smile should be the reward of the individual who tells you that in his hands at least they have ceased to be the opprobria of medicine?

A few cases may better illustrate this part of our subject.

Case 1.—A miner, aged 46, was brought to me by his friends, from the forest of Deane; he laboured under mania, symptoms of which were developed in the course of a fever. I succeeded in curing him by *quinine*. Twelve months afterwards, having been exposed to wet and cold, the same individual again had fever with maniacal symptoms. The same remedy was repeated, and with equal success.

Case 2.—A man of the 30th foot, after a course of hard drinking, had epilepsy, which recurred every alternate night at the same hour, and was followed by maniacal symptoms. Quinine, silver, calomel were tried and failed; I then prescribed arsenic, after taking which he never had another fit.*

Where the case has been of long standing, I have been frequently obliged to resort to the greatest variety of remedies and combinations of remedies;—the fits yielding one day to one agent, another to another.

Case.—A mason, aged 40, who had been seven years the subject of Epilepsy, was cured by me in six weeks. The remedies were quinine, arsenic, opium, copper, &c., which were sometimes alternately administered, and sometimes exhibited in combination. A galbanum plaster applied to the spine, not only *stopped* the *shivering fits*, which usually ushered in his disease, but very materially assisted me in obtaining a successful result. This man

* The resemblance of the epileptic fit to the effects of drunkenness has not been unobserved. In both we remark the same heavy sleep and snore, and the same unconsciousness, after the fit, of everything that happened while it lasted: both may pass into apoplexy, and that apoplexy end in death.

told me he was very "comical and whimmy" the days he had the fits.

STRICTURE.

With the same remedies, prescribed upon the same principle, I have been equally fortunate in the treatment of Urethral Stricture—a disease for which the bougie, in general practice, is far too indiscriminately employed. You all know the beneficial influence of *warm* baths in this disease, and some of you may have heard of the advantages to be obtained from the internal exhibition of *Iron*. But the still greater influence of *Quinine* over stricture is not so generally known. It is unnecessary for me to give any case of my own in evidence of this,—Sir Benjamin Brodie having detailed at length the instance of a gentleman affected with spasmodic stricture of the tertian type—that is to say, which came on every alternate night about the same hour, and which yielded, in his hands, to quinine. The marked periodicity of this case pointed out the proper treatment; but in cases where this is less striking, you have only to ask the patient if there are times when he passes his urine better than at others; and if he answers in the affirmative, you may be sure the stricture depends upon no permanent thickening of the mucous membrane of the urethra, but on a remittent spasmodic action of its muscular apparatus. Such a patient, on coming out of a warm room into a *cold* one; will find himself, all in a moment, unable to pass a drop of water. See then the effect of thermal change in producing spasm,—and hence too the benefit to be derived from the warm bath in the treatment of spasm generally. With the chrono-thermal medicines, you may save yourself the trouble, and the patient the torture, of passing the bougie, —that is to say, if you prefer his interest to your own, which last manifestly points out to the number of dishonest persons who infest the profession, that such a mode of preventing return of disease is less lucrative than that which enables them to give temporary relief at the expense of a long attendance.

ASTHMA.

"The fits of convulsive Asthma," says Darwin, "return *at periods*, and so far resemble the access of an *intermittent fever*." This disease I have very generally cured with one or other of the chrono-thermal remedies, and with two or more in combination, I have seldom been compelled to complain of ill-success in its treatment. In one case, however, that of a gentleman who had the disease every second night, after having nearly exhausted my best resources, I succeeded in curing him by the application of a warm plaster along his spine. Here you again see, in the most direct manner, the advantage of attention to temperature: the spine, in this case, was always chilly, but became warm and comfortable under the use of the plaster. I have applied the same remedy with advantage in Urethral Stricture.—So much for spasmodic diseases, before parting with which, however, we may mention that many medical writers have detected an analogy betwixt *spasm* and *tremor* without being at all able to explain in what it consisted. Analyse tremor, and you will find it to be merely a rapid succession of incomplete spasms. In *St. Vitus's dance*, or as it is sometimes called, "the leaping ague" which is also a periodic disease, you may see every variety of spasmodic and tremulous action. This disease I have often met with in children. It may, in most cases, be speedily cured by exhibition of minute doses of some of the chrono-thermal remedies; one remedy answering better in one case, another in another.

PALSY OR PARALYSIS.

We now come to PALSY—a loss of muscular power greater than either of the two states just considered.

The following case of periodic *Aphonia*, or paralysis of muscles necessary for the proper performance of the functions of speech, will show you how palsy, like every other form of disorder, may exhibit the most perfect intermissions. It is copied from a foreign journal. "A peasant girl was attacked in the following manner:—

speechlessness came on every day at four o'clock, p. m., accompanied by a feeling of weight about the tongue, which remained a quarter of an hour. The patient, while it lasted, could not utter any sound, but occasionally made an indistinct hissing noise. Consciousness did not seem impaired during the fit. She ascribed her inability to speak to a feeling of weight in the tongue. The paroxysm went off with a large evacuation of watery urine, accompanied by perspiration and sleep. Ten such attacks had occurred, when Dr. Richter, of Wiesbaden, was called to see her; he ordered her considerable doses of sulphate of quinine with immediate good effect from the first day. The attack returned, but in a mitigated form, and on the second day no trace of it was visible, except a certain degree of debility and fatigue felt at the usual hour of its coming on."—(Hecker's Journal and Dublin Journal.)

In the above case, the corporeal temperature is not stated, but the periodic remission and manner of its cure are sufficiently illustrative of its nature. Not long ago, I was consulted in a similar case, which was moreover complicated with palsy of one side. Sarah Warner, aged 25, married, had suffered periodically from loss of speech, and inability to move the leg and arm of one side. Various remedies had been ineffectually prescribed by her medical attendants, who all looked upon her disease as apoplectic; one of them indeed proposed to bleed her, but she would not consent. When she applied to me, I ordered her a combination of quinine and iron, after which she never had another fit.

The following case is illustrative of the accomplishment of a cure in palsy, long considered hopeless :—

Mrs. Sargent, aged 40, a married woman and the mother of several children, had kept her bed for eight years, on account of paralysis of the lower extremities, during which period she had been under the treatment of eight or nine different physicians and surgeons of a provincial dispensary. Such at least was the woman's statement, confirmed to me by many people of respectability, who had visited her from the commencement of her illness. When I first

saw her, her voice was an almost inaudible whisper; she was liable to frequent retchings, complained of spasms with much pain of the loins and limbs. She had irregular *chills* and *flushes*, and some days had more power in her legs than others. Her last Dispensary medicine, mercury, which she believed had been given her by mistake, had produced salivation, but with decided aggravation of her symptoms. In this case, I prescribed a combination of remedies, the principal of which were hydrocyanic acid and cantharides. Under this treatment, her voice returned in about a week; her recovery from every symptom was complete in six weeks, and she has had no return in the two years since she was under my care.

The next case, from its rarity, is still more interesting. Charles Overbury, aged 10, had been in the following state for some months previous to my first visit. I found him, lying upon a couch, every muscle of his face in such curious repose, that his countenance seemed quite idiotic; his arms and legs were so powerless, that if you held him up, his limbs doubled under him, like those of a drunken person; and upon whichever side you placed his head, he was unable to remove it to the other; his deglutition was rather difficult, but the heart and respiratory muscles performed their respective offices with tolerable correctness. The patient laboured under complete loss of speech the entire night, and nearly the whole day. About the same time daily—noon—he could utter the monosyllables *yes* and *no*, but this power remained with him for half an hour only. The remedies to which I resorted in this case were minute doses of calomel, quinine, and hydrocyanic acid, all of which improved him, but the last proved the most effectual. In less than three weeks he was running about, well in every respect, and the change in his countenance, from apparent idiocy to intelligence, was as perfect a transformation as it is possible to imagine. This case, Gentlemen, was the complete converse of that of Madame Malibran, who you will remember became, at particular times, quite stiff and rigid in every muscle of her body. This lady fell a victim to

the *bleeding mania.* In Overbury's case you marked, I hope, the periodic, though imperfect, remissions which it exhibited.

As ague slips often insensibly into less obviously remittent forms of fever, so we occasionally find palsy becoming more or less permanent. In the following case it became so all at once: — I was suddenly called to see Mrs. T——, of Clarges Street, I found her with complete loss of the use of one side, and partial palsy of the muscles on the same side of the face. The night before, she was suffering from domestic affliction, and the next morning fell down paralytic while entering her own door. Her face was pallid, and her feet were cold. The people about her were urgent that she should be bled, but I ordered her warm brandy and water instead. Mr. Wm. Jeaffreson, of South Audley Street, having been formerly her medical attendant, was sent for, and agreed with me that she should not be bled. A mild purgative having been given her, she was ordered a combination of quinine and strychnia, from which her health not only improved, but with this and country air, in six weeks she recovered the use of her side so far as to be able to walk without a stick, and the use of her arm is, at the moment I speak, also fast returning.

The following cases exemplify the cure of palsy, of a single limb. Case 1st.:—Mary Budie, or Boddy, aged 18, from the age of eleven, had weakness of the back and loins, and she gradually lost the use of her right leg. In this state she remained for three years; sixteen months of this period she was an in-patient of the Gloucester Infirmary, in which Establishment her mother held the situation of nurse. But cupping, bleeding, blistering, etc., were all ineffectual. The patient complained of having suffered from shivering fits, followed by heats, and, sometimes, perspirations. The catamenial secretion was, as you might expect, irregular; for where the health is wrong throughout, this, like every other function, must be more or less implicated. The same mode of treatment as in Mrs. Sargent's case, with the addition of a

galbanum plaister to the loins, in which she complained of coldness, was adopted, and followed with like success. She had scarcely been a fortnight under my care, before she completely recovered the use of her paralysed limb, and she has had no relapse during a period of four years, the greater part of which, indeed, she has been in service.

Case 2nd.—Esther Turner, aged 30, when in the service of Mr. Ward, the master of a respectable Boarding School, at Painswick, fell down stairs, and from that moment, lost the use of her left leg. After a period of eleven years, during which she had been ineffectually under treatment in various hospitals and infirmaries, she came on crutches to my house. She explained that she was subject to severe shivering, with occasional convulsions, her spirits were much depressed, and her catamenial secretion had always been, more or less, disordered. Her leg, she said, had more feeling on certain days than others. After trying her for some time with a combination of hydrocyanic acid and cantharides, without any improvement, I prescribed a pill, containing a combination of quinine, silver and colchicum, night and morning. She progressed from that day; and in about six weeks, I had the satisfaction to see her in possession of the complete use of her limbs; nay, she returned to her service at Mr. Ward's, which she only left to get married.

CURVED SPINE.

I could here, Gentlemen, give you numerous other cases, all more or less explanatory of the manner in which palsy of almost every muscle of the body may be developed and cured. For the present, I shall content myself with recording my experience of a disease, which, so far as I am aware, has never before been viewed in this light, the *Curved* or *Crooked Spine*. By most authors, this disorder has been supposed to be, under all circumstances, an affection of the bones. Some have vaguely referred it to peculiarity of nervous action, while others have theoretically traced it to looseness of the ligaments. When the late Mr. Abernethy said it was owing to a

"rancour in the muscles," he only used an abstracted term to conceal his ignorance of the entire matter. Yet to the care of this otherwise accomplished man, was almost every case of spinal curvature, among the higher ranks, at one time entrusted. What the disease really is, we shall now proceed to demonstrate.

The mast of a ship is kept erect by the *stays* and *shrouds*; if you divide or loosen these on one side, the mast falls more or less in an opposite direction. The human spine is kept upright by a similar apparatus—the *muscles*. If any of these muscles become paralysed on any side, the spine, from the want of its usual supporting power, must necessarily, at that particular place, drop to the other side. But being composed of many moveable pieces, or joints,—the *vertebræ*—the spine, unlike the mast, cannot preserve its form, but must take the shape of a curve or obtuse angle; and the degree and situation of this curvature will depend upon the number and particular locality of the muscles so paralysed. The disease, or "deformity," for Mr. Abernethy would not allow it to be anything else, under all its uncomplicated variations of external and lateral curvature, is the result of palsy; which palsy, for the most part, is a feature or association of general remittent disorder; and whether complicated with vertebral disease or not, is no more to be influenced by issues, setons, moxas, &c., except in so far as these almost invariably confirm it by further deteriorating the general health of the patient.

In the commencement of most cases of this kind, the patient is taller one day than another, and I have never had such a patient who has not confessed to heats and chills. The following are cases in which these phenomena were observed.

Case 1st.—A young lady, aged 16, had a lateral curvature of the dorsal vertebræ, causing the inferior angle of the shoulder-blade to protrude. I prescribed for her calomel and quinine, in small doses, and directed her to have her spine rubbed night and morning with soap liniment. In less than a month, the patient had gained

three inches in height, and in two months more, she was erect.

Case 2nd.—A lady, forty-five years of age, the mother of children, had her spine so much curved at the sacro-lumbar junction, that to use her phrase "her hip grew out." I ordered a warm plaster to be applied to the spine, and prescribed hydrocyanic acid and quinine. In three weeks she stood upright. Four years afterwards she had a return, when the same means were again successfully put in practice.

The following are cases of external curvature, complicated with vertebral disease.

Case 1st.—Mrs. Craddock, aged 25, had, for upwards of eighteen months, great weakness in the upper third of the back, where a swelling made its appearance, gradually increasing in size. According to the statement of this woman, she had been an in-patient of the Gloucester Infirmary for seven months; during which, she had been treated by issues and other local measures, but with no good effect. When I first saw her, she could not walk without assistance. Upon examination, I found a considerable excurvature, involving the third, fourth, and fifth dorsal vertebræ; which vertebræ, were also painful and enlarged, and the skin which covered them was, more or less, red. The patient was extremely dispirited, shed tears upon the most trifling occasion, and was subject to *tremblings* and spasms. Her back was generally chilly, and she suffered from coldness of feet. Some days she thought the "swelling" in her back was not so great as upon others. And upon those days, it was remarked, her spirits were not so low. I directed the issues to be discontinued, and ordered a combination of hydrocyanic acid and tincture of cantharides, to be taken three times a-day. These medicines she had scarcely continued a fortnight, when the improvement in her general appearance was most decided; the protuberant part of her spine, had in that period, considerably diminished—her health daily became better, and, in less than a month, her cure was accomplished. A permanent

curve, slight when compared with her former state, still remains.

Case 2nd.—A young gentleman, 9 years of age, had external curvature of the dorsal vertebræ; one or more of which, were in a diseased and even ulcerated state, as was obvious, from the discharge which proceeded from a fistulous ulcer, connected with the spine. His mother observed, that he stood more erect some days than others. When I was first consulted, he had an issue on each side the spine, but these, as in the former case, having been productive of no good, I ordered to be discontinued, Keeping in view the remittent and constitutional nature of the disease, I prescribed small doses of calomel and quinine. The very next day, the discharge was much diminished, and a cure was obtained in about six weeks. The ulcer in that time completely healed up, but a permanent curve, of course, remained—trifling, when compared with the state in which I first found him. I might, Gentlemen, give you many other such cases, but my object is to illustrate a principle, not to confuse you with too much detail. These two cases are sufficient to show you the nature and best mode of treating, what you may call, if you please, *Vertebral Consumption*, though I am not sure the schools will agree with you in the designation. The one case was in its incipient state, the other fully developed. It has been for some time the fashion to confine such patients to a horizontal posture, and a rich harvest, machine and bedmakers of all kinds have derived from the practice. No treatment can be more erroneous. Confinement to one posture is alone sufficient to keep the patient nervous and ill; while his own feelings and wishes are, for the most part, the best guide as to whether he should rise, walk, sit, or lie down. In this *he* has no theory—the doctor, too often has nothing else.

STRABISMUS OR SQUINT.

Equally effectual, Gentlemen, have I found this principle of treatment in that particular palsy of one or more muscles of the eye-ball, which gives rise to *Strabismus* or

Squint. Parents who have children thus affected will tell you that some days the deformity is scarcely, if at all, perceptible. Could there be, in any case, a more powerful evidence of *remission?* Yet you hear medical men talking of gastric irritation, fœtid secretions, and heaven knows what all, as causes; and acting upon such theories, they go on, from day to day, purging and blistering the little creatures, until they very often worry them into convulsions, or render their squint permanent. By attending to the remitting, nay in many instances the absolutely periodical nature of the disease, I have scarcely ever failed in accomplishing the desired object in the early stages, and have often ameliorated the case of longer duration. In a case which lately came under my care, the boy squinted every second day: he was cured by quinine. In another, exactly the same, I run through a variety of medicines ineffectually, and at last succeeded with musk. I was sometime ago consulted in the case of a young gentleman who had squint and curved spine. He was cured of both by minute doses of calomel and quinine.

AMAUROSIS.

As we are upon the subject of the eye, I shall now speak of that kind of paralytic blindness which is commonly called *Amaurosis.* It was once supposed to be a form of *Gout,* and called in consequence GUTTA *serena,*—and a great mystery it was considered—almost as much as gout at the present day; upon which subject, by the way, we shall hereafter give you cause, perhaps, to laugh at the whole faculty. Our business now is with palsy of the *optic* nerve—the nerve of sight. To medical men I need not point out as examples of remittent amaurosis, the night and day blindness—*nyctalopia* and *hemeralopia* as they are called. What say you to the term eye-ague? Would not that be a very good name for these remarkable periodic affections?—or rather affection, for they are one and the same, only occurring at different periods. These, Gentlemen, are examples of intermittent amaurosis, and they have been caused and cured by everything you can name.

You find them frequent in long voyages, not produced, in that case by *marsh miasma,* but by depraved and defective food, with exposure to wet, and cold, and hard work, perhaps, besides. The *Lancet,* for Dec. 8, 1827, details the case of a girl twelve years of age, who had intermittent blindness of both eyes, palsy of the limbs, phrenzy, catalepsy, and epilepsy, from all which she recovered under a purgative treatment, followed up by ammoniated *Copper*—a chrono-thermal remedy. This case establishes the relations which these last symptoms all maintain to each other, and their remittent character explains the still greater affinity they bear to ague.

The remedies which I have found most efficient in *permanent* amaurosis have been the chrono-thermal or ague-medicines, combined with mercury, creosote, &c. The parish clerk of a place somewhere near the forest of Dean, came to me all but "dark," as he expressed it. I tried him with a good many chrono-thermal remedies, from most of which he received benefit; but creosote cured him, though not before I pushed the dose to twenty drops. The following case, from the length of time it had lasted before a cure was accomplished, is worth detailing at length. Charles Emms, aged 25, stated to me that he had been completely blind of both eyes for upwards of nine years, four of which he passed in the Bristol Asylum, where after having been under the care of the medical officer of that establishment, he was taught basket making, as the only means of earning his subsistence. He had been previously an in-patient in the Worcester Infirmary, under Mr. Pierrepoint, but left it without any benefit. Some days he perceived flashes of light, but could not even then discern the shape or shade of external objects. Before he became completely blind, he saw better and worse upon particular days. When he first consulted me, his general appearance was very unhealthy, his face pale and emaciated, his tongue clouded, appetite defective and capricious, and he described himself as being very nervous, subject to heats and chills, palpitations and tremblings; his spirits were depressed. My first prescription, quinine, disagreed; my second, silver, was equally un-

successful; with my third, hydrocyanic acid, he gradually regained his vision—being, after an attendance of four months sufficiently restored to be able to read large print with facility. Such has been his state for two years. I need not say his general health has materially improved, his appetite, according to him, having become too good for his circumstances.*

DEAFNESS.

The last paralytic disorder upon which I shall detain you is that kind of deafness depending upon paralysis of the nerve of hearing. If patients who have been subject to this disease, be questioned upon the point of remittency, they will, in a great majority of instances, admit the fact, and at the commencement, or in the early stages, will universally acknowledge the chills and heats from which they suffer. Attention to this will often enable the physician to improve patients under the most unpromising circumstances.

The following case will show you how Deafness, among other symptoms, may become developed during a fit of intermittent fever. A gentleman, whom I sometime ago attended, had for three years been more or less the subject of ague. The fit latterly came on in the middle of the night during his sleep, regularly every week, about the same hour. After shivering intensely, he had a hot fit, with violent pain of the side, and great *Deafness;* he had then a sweat with relief. In the morning you found him yellow all over, but with his hearing nearly as good as ever. This patient had been attended by several eminent men in Dublin, most of whom gave it as their opinion that his disease was the effect of gall-stones. Now, gall-stones he had never seen, and had these been the cause, his fits must have been irregular, and have come on while in motion, whereas they were not only perfectly periodic, but attacked him during the repose of sleep. What was the

* Before I quit Disease of the Eye, I must direct attention to the Indian mode of treating cataract by Mr. Jeaffreson, of South Audley Street—a gentleman whose experience and practice in such diseases are perhaps greater than those of any other individual in Europe.

temporary jaundice, Gentlemen, but an effect of spasm of the bile-ducts, developed, like spasm of other parts, during the aguish paroxysm? This in him, the day before, was generally preceded by listlessness and other sensations of weakness. He was generally free from the disease when he travelled—just what you frequently find in other cases of ague. While he was under my care, a pill composed of three grains of opium and two of musk, if taken in time the night of the expected paroxysm, infallibly kept it off. I have treated numerous cases of deafness, in reference to *remission*, with extraordinary success, and I would have given cases to you in proof, but for the length to which this lecture would otherwise extend. I am content to point out the principle of cure. I will not, therefore, say anything further upon the subject, except merely to tell you that the disease, under certain of its forms, is very successfully treated by Mr. James Yearsley, of Sackville Street, who, by injecting warm fluids into the ear, and attending to the state of the Eustachian passages, has materially improved the surgical department of *Auricular* practice.

APOPLEXY.

In alliance with palsy, Gentlemen, we often find Apoplexy. In fact, they are by most practitioners looked upon in much the same light. Celsus treats of them as one and the same, and among the other modes of practice in both, he mentions blood-letting, which, he says, in those cases, where all the limbs are powerless, either "kills or cures;" his words are: *si omnia membra vehementer resoluta sunt, sanguinis detractio vel occidit vel liberat.* What is the modern treatment of apoplexy? Does it not almost entirely consist in those most doubtful of all remedies—Blood-letting and Starvation? And what is the usual result? Just what we ought to expect—death in the great majority of cases. Were I to urge that cold Affusion might, during the paroxysm, be a substitute for these heroic means, I should, perhaps, be listened to patiently, but were I further to recommend

quinine and arsenic as preventives, what would the profession say? Verily that I had lost my wits. Now, instead of giving you cases of my own, so treated, and successfully too, I will just mention that I have received a letter from Mr. Walter, Surgeon, of Dover, in which he says: "You will excuse the liberty I take, an entire stranger, in thus addressing you. I have to thank Mr. Hume for introducing me to your writings, your name being already familiar to me. I must confess, I was much startled at doctrines so opposed to what I had previously been taught, or had heard of. By strict attention to the cases which came under my care, I soon became convinced that your great principle—the periodicity of symptoms—was of much more general application, than I had previously believed possible. If your professional avocations will allow you to publish some cases, with the treatment in detail, such a work would be of great practical utility. *The application of your theory has saved me from bleeding in two cases of* APOPLEXY, *both of which did well*—as well as in others. I propose keeping the detail of my cases, and should any present well marked features, they will be much at your service. I am comparatively a young practitioner, but *experienced enough to have often wished for some better rule of practice than that I have hitherto possessed*,* and yours seems, to me, to approach much nearer to my ideas of such a rule, than any I have hitherto met with." The following case treated by Dr. Graves, I extract from the *London Medical and Surgical Journal.* "I was sent for," says the doctor, "in a great hurry to visit a gentleman in the neighbourhood of Donnybrook—he had slept well till four o'clock in the morning, when he was awakened by a general feeling of malaise, shortly after which, he complained of chilliness, some nausea and headache. After these symptoms had continued about an hour, his skin became extremely hot, the pain of the head intense, and drowsiness was complained of, which soon ended in perfect coma, with deep snoring and insensibility; in fact,

* So much for the doctrine of the schools!

he appeared to be labouring under a violent *apoplectic fit* —he seemed to derive much advantage from bleeding and other remedies, and to my surprise was perfectly well when I visited him in the evening. The day but one after, at the very *same hour*, the very same symptoms returned, and were removed by the same remedies (?). I must confess, that I could not explain, in a satisfactory manner, the perfect freedom from all cerebral and paralytic symptoms after two such violent attacks of apoplexy. But when a third attack came on, I then saw it was a case of the *Tertiana Soporosa* [vowels and consonants merely] of nosologists, and I prevented the return of the fits by the immediate exhibition of Quinine."

The last part of the doctor's practice, Gentlemen, you will all admit was unexceptionable. The only wonder is, that he did not sooner resort to it. But when he supposed that the fits were in any way influenced by the bleedings which he employed, I fear he only fell into the too common error of mistaking the natural remissions of disease for the results of a questionable practice. One thing is certain, the *repeated depletion* had *not* the slightest effect in *preventing return*—a lesson, at all events, to such practitioners as imagine they can avert threatened Apoplexy by depletion. Such measures have only appeared, to me, to make the approaching fit come on the sooner, and in many instances, to render the disease more certainly fatal. Of this, the medical practitioner may be assured that all apoplexies, like the case just detailed, commence with the symptoms or shades of symptom of ague—that all are marked by remissions, more or less perfect; and if, instead of the usual sanguinary measures, cold affusion were applied to the head in the *Paroxysm*, and quinine, arsenic, &c. exhibited during the *Remission*, humanity would not have to deplore the utter inefficacy of the medical art in a disease, which has hitherto defied the too long misapplication of one of its most dangerous powers. Upon this subject, Gentlemen, we shall have something more to say when we come to consider the effects of blood-letting.

DISEASES OF SENSATION.

Still connected, however, with apoplexy and paralysis, are diseases of sensation. Cases of *Anæsthesia*, or loss of the sense of touch, and also those of partial or general numbness will, in the greater number of instances, be found to exhibit remissions in their course. So also will almost every instance of that exalted degree of sensibility known by the various names of *tic douloureux*, *sciatica*, etc. according to the locality of the various nerves supposed to be their seat. Look at the history of these diseases. What have your surgical tricks done for their relief, your moxas, your blisters, your divisions of nerves! The only remedies to which these diseases have yielded have been the chrono-thermal remedies, bark, arsenic, iron, prussic acid, etc. the remedies in a word of acknowledged efficacy in ague. I shall here, Gentlemen, present you with a case from the *London Medical and Surgical Journal*, illustrative of the nature of *Tic* when involving the nerves of the face. It is rather affectedly styled by the narrator *Sub-orbital* NEUROPATHY. The pain first supervened after a fright, it returned every day at two o'clock, commencing at the origin of the suborbital nerve, extending along its course, and lasted from half an hour to an hour. Two grains of sulphate of quinine given every two hours for three days produced in so short a period, a complete cure. The same prompt and favorable effects, were observed in another case of frontal neuralgia, that appeared without any known cause. Now, Gentlemen, this *frontal neuralgia* is commonly known by the name of brow-*ague*. Why then mystify us with *neuropathy*, *sciatica*, and all those other villainous terms, that, so far from enlightening the student upon the subject of medicine, do nothing but lead him into darkness and confusion. All these are mere varieties of Ague; the place of pain, making the only difference.

The following case I extract from a French Journal.* "A married woman aged 48, felt one morning a pain in the

* Gazette Médicale.

left side as if in consequence of an exertion. It extended under the false ribs from the vertebral column, and was felt to the extent of four fingers. It returned *at intervals* and was very severe, piercing and burning. The abdomen became at the same time tumid with flatus. The patient had vomiting and a flow of high coloured urine voided with pain. The *fits* came on every night from one o'clock to six or seven, in the morning. During the paroxysm, the patient complained of spasms of the side, the painful part of which was slightly swelled, and of a higher temperature than the rest of the body. The face was sallow and clay colored. This case on the discovery of its intermittent nature, was treated with *quinine* to which it at once yielded, with *complete restoration of the patient's general health.*" A similar case occurring in a patient of my own, a lady of about 50 years of age, yielded to half grain doses of nitrate of silver, after having successively resisted quinine and prussic acid. She had been for six weeks previously, the patient of a gentleman, who after exhausting the usual routine of leeches, blisters, blue pill, etc. left her in a worse state than when he found her.*

Cases of Depraved Appetite, and also of Loss of Taste, all depend signally upon constitutional integrity of state. The following example of what is called *Bulimia*, or excessive appetite, I copy from the lectures of Mr. Abernethy. "There was a woman in this hospital, who was eternally eating; they gave her food enough, you would have thought, to have disgusted anybody, but she cram-

* This case reminds me that there is something radically wrong in the present mode of remunerating medical men. The practitioner who preceded me here, got fifty guineas for doing the patient no good, or rather some harm. I got three for curing her.

The Emperor of China knows human nature better, than to hold out a bonus to the doctor to keep him ill; for while in health, he pays his physicians a certain daily stipend, he stops it, the moment he becomes sick! You may be sure they do all they can to get him out of their hands. What fools the English are, to suppose that medical men, in such times of competition as these, will prefer the public interest to their own. What other class does so? Do Lawyers? This matter wants reform.

med it all down; she never ceased but when her jaws were fatigued. She found out that when she put her feet into *cold water*, she ceased to be hungry." What could be this woman's inducement to put her feet in cold water in the first instance? Was it not their high temperature —the fever under which she laboured? On the other hand, you may often see the same thing in a different condition of body; namely, in the cold stage of ague, and in cholera, where I have known the patient to be perfectly *voracious* an hour or two before death. A gentleman of my acquaintance, who was fond of play, told me, that when he lost much money, he was always sure to become *ravenously hungry*; but that when he won, this did not happen. The temperature of his brain must have been different at these different times.

To the state of temperature of the body, we must also refer the various degrees of THIRST, from which so many invalids suffer. This, like hunger, is a depraved sensation, and its seat is the brain. If we have intermittent fever, so also have we intermittent hunger and thirst among the number of morbid phenomena. Colonel Shaw, in his "*Personal Memoirs and Correspondence*," has this remark: "I had learned, from my walking experience, that to *thirsty* men, drinking water only gives a momentary relief; but if *the legs* be wetted, the relief, though not at first apparent, positively destroys the pain of thirst."

We have, hitherto, Gentlemen, confined ourselves to simple or functional diseases, with the exception of Vertebral Consumption, which I thought it best to arrange with curved spine generally, and thereby make that subject more perfectly understood. In our next lecture, we shall enter into a consideration of such disorders as manifest more or less lesion of structure in their course. So far, these diseases are somewhat more complicated than those we have just left. To a certain extent, too, they admit modification of treatment. In most cases of this kind, though not in all, it is my custom to prescribe one or more powers, having a general chrono-thermal influence, with one or more, having a special local bearing. I have necessarily, on occasion, combined remedies which

may partially decompose each other. In continuing still to do so, I am justified by *successful results*, the only test of medical truth—the ultimate end and aim of all medical treatment. A charge of unchemical knowledge has been occasionally urged against me for this, by drug compounders. But what says Mr. Locke?—"Were it my business to understand physic, would not the surer way be to consult nature herself in the history of diseases and their cures, than to espouse the principles of the dogmatists, methodists, or chemists?" This charge, then, I am willing to share, with numerous medical men, whom the world has already recognised as eminent in their art. By such, the answer has been often given, that the human stomach is not a chemist's alembic, but a living organ, capable of modifying the action of every substance submitted to it. And here I may mention, that Sir Astley Cooper, when I sent him my work, entitled "The Unity of Disease," with that candour and gentlemanlike feeling by which he is not less distinguished, than by his high eminence as a surgeon, wrote me as follows:

"Dear Sir, I thank you most sincerely for you valuable work. I have not the least objection to being *unchemical*, if I can be *useful;* and I agree with you, that the living stomach is not a Wedgewood mortar.

Yours truly,

ASTLEY COOPER."

Dr. Dickson, Clarges Street,
Piccadilly.

In the course of our next Lecture*, we shall explain the chrono-thermal mode of preventing and treating Hæmorrhage, Heart-disease, Consumption of the Lungs, and also the Consumptive Diseases of Joints, termed *white swelling*, *morbus coxarius*, &c. The simplicity of our views, and the success attending our practice, contrast strongly with the doctrines of the schools, and the doubtful results which are given by those medical men, whose minds are so imbecile as to be still enslaved by them.

* Numerous important avocations render it impossible for me to publish Lecture III. before the 15th of January next.—S. D.

FALLACIES OF THE FACULTY.

LECTURE III.

HÆMORRHAGES — HEART-DISEASE — PULMONARY CONSUMPTION—GLANDULAR COMPLAINTS—CONSUMPTIVE DISEASES OF JOINTS.

GENTLEMEN,

WE have hitherto derived our illustrations of the *intermittent* nature of Disease, almost entirely from such forms of disorder, as by the profession of the present day, are termed FUNCTIONAL; that is to say, such as are uncomplicated with organic decomposition or any marked tendency thereto. Now, in the commencement, all complaints are simply functional; I do not of course include those organic lesions, that have been the immediate effect of mechanical or other direct injury—such as the passing of a small sword through the lungs or liver. I speak of disease in the *medical* acceptation of that term—disease in which one or more constitutional paroxysms occur before organic change becomes developed. Enquire the *Sequelæ* of those agues for which the usual *routine* of medical treatment may have proved unavailing. Do not these comprize every structural change to which nosologists have given a name?—hæmorrhage, or rupture of blood vessels wherever situated, diseased lungs by whatever termed, with all the various visceral alterations which have obtained names more or less expressive of the localities in which they become known to us—the enlarged, softened or otherwise disorganized heart, liver, spleen and joint—the indurations and other changes which take place in the several glands of the body, whether called scrofulous or consumptive, cancerous or schirrous. When patients thus afflicted complain of the *ague-fits*, from which they suffer, their medical attendants too often point to the local disease as the cause, when in reality, it has been a mere feature or effect of repeated paroxysms of this kind. Even John Hunter, with all his acuteness, fell

into this error, when he said, "We have ague too *from* many diseases of parts, more especially of the liver, as also the spleen, and *from* induration of the mesenteric glands." It is only of late years that the better informed members of the profession have begun to suspect that these structural alterations, instead of being the causes of the "constitutional disturbance" are the results. But this phrase in most instances, they use without any very definite idea of its meaning—and when questioned in regard to it, either confuse the matter with the mixed-up jargon of incompatible theories, or frankly confess that they entertain notions which they feel themselves unable by any form of speech to impart to others. Gentlemen, "constitutional disturbance" when analyzed, will be found to consist of neither more nor less than an *excess* or *diminution* of the healthy temperature and motions of various parts of the body,—amounting when the disease is *recent* (or "acute") to the bolder features of INTERMITTENT FEVER—and in cases of longer standing (or "chronic") coming at last to the more subdued symptoms of that universal disease. Betwixt these two extremes you have every kind of intermediate shade,—which shade sometimes depends upon duration, sometimes upon individual constitution.

Every child of Adam comes into the world with some weak point—a *predisposition* to disease of one locality or tissue of the frame rather than another; but many persons from accidental causes have also their weak points. Of this kind are such parts of the body, as after having been externally injured get so well, that while you continue in health, you suffer no inconvenience; but as old age steals upon you, or when your general health gives way, you are reminded by certain feelings of weakness in the parts injured of the accidents that have happened to you, and that to keep the affected parts in tolerable strength, you must not play tricks with your constitution. Individuals so situated can predict every change of weather; they are living barometers, and can tell you what kind of a day it shall be, before they rise in the

morning. They obtain their knowledge of this from the experience of their feelings in their old wounds and fractures. Now, Gentlemen, this is just what you ought to be prepared to expect;—the atoms of *repaired* parts must always have a weaker attraction to each other, than the atoms of the other parts of the frame—and they must, therefore, in the very nature of things, be more liable to be influenced by external agency—by everything, in a word, that has the power to put matter in *motion*. Whatever, under ordinary circumstances, shall slightly shake or affect the whole body, must, under the same circumstances, be a subject of serious import to its weaker parts; and this argument also applies, with equal force, to the atoms of those parts of individual bodies, which, by hereditary predisposition, manifest a similar weakness of attraction to each other. As the child is but an extension of the living principle of the parents, its frame must naturally, to a certain degree, partake of the firmness and faults which characterised its progenitors, whether mental or corporeal—resembling them, not only in external feature, but copying them even in their inward configuration. Such similitude we see extending to the minutest parts, whether these be perfectly developed, or defectively, or even *superfluously* constructed. As instances of these last, I may mention, that I have known particular families, where constant repetition of six fingers to the hand has taken place in successive generations, and others, where the digital members have been as hereditarily reduced beneath the correct human standard. Then in regard to hereditary *mental* resemblances, you will see children, whose fathers died before they were born manifesting the same facility or stubborness of temper, the same disposition to moroseness or jocularity which characterized the authors of their being. Relations will sometimes hold up their hands with astonishment at the mental likeness of children to their parents; "Ah! he is just his father over again," is a common and correct remark of the least observant, as well as of the most reflecting part of mankind. In the doctrine of *hereditary*

predisposition, then, the profession and the public, I believe, are equally united in opinion;—but whether they be or not, is of but little import, while you have eyes to look around you, and can be yourselves convinced of it. I must, however, tell you, that in cases of hereditary predisposition, much will depend upon circumstances, whether such predisposition be actually, and visibly, developed in the individual members composing a given family. An individual, for example, in whose family the heart or lungs is the weak point—by guarding himself against too rapid changes of temperature—and availing himself of a fortunate position in society as to pecuniary and other means, may so controul numerous exciting elements of disease, as to pass through life happy, and comparatively healthy;—while his less fortunate brother, worn down by an accumulated weight of domestic and other trouble, shall not only suffer in his general health, but shall as surely have the weak point of his family's constitution brought out in his individual person. We are all, then, more or less the "sport of circumstances."

Among the various diseases which, from their frequency, are justly recognized as the most prominent and important that affect the inhabitants of these islands, I may mention, Spitting of Blood, Consumption and Glandular disorders. The rapid transitions of temperature, so characteristic of this climate, certainly predispose us to these complaints;—for while in the warmer countries of the East, Dysentery and Abscess of the Liver carry off the greater number of the various races that compose the population,—the natives of India, who have died on our shores, have generally fallen victims to Glandular and Chest-Disease. Even the monkey acknowledges the baneful effects of such rapid thermal transitions on his respiratory organs. More than one half of this class of animals, that come to England, die of pulmonary consumption. Diseases of the chest and glands, certainly become hereditary; but under that head, you may include a great many others,—epilepsy, apoplexy, palsy,

mania,—and, perhaps, every purely constitutional complaint, which has obtained a name. Could the breeding of mankind be as closely watched and as easily controlled as the breeding of our domestic animals, incalculable advantages, moral, as well as physical, might be the effect of judiciously crossing particular races with each other. The tendency to the particular passions and diseases, which characterize nations and families, might, in this manner, be as certainly diminished, as the beauty of the face and form might be exalted in its standard;—for both depend greatly upon hereditary configuration, or that particular atomic association of certain parts of the body, which you find prevailing in families—other external modifying circumstances being, at the same time, kept in view, such as climate, temperature, social and political relationship, &c.

We shall now, Gentlemen, direct your attention to the subject of particular diseases, and first to Vascular Lesions or Rupture of Blood-Vessels—technically termed

HÆMORRHAGES.

Darwin places these among his list of remittent diseases; particularising as such, *Hæmoptoë* or bleeding from the nose; *Hæmoptysis* or spitting of blood from the lungs; *Hæmorrhoids* or bleeding piles: "Sometimes," he says, "the hæmorrhage recurs by *daily periods*—accompanying the hot fits of FEVER, or in the intermissions. This is to be *removed by curing the febrile paroxysm.*" What is the old woman's practice in bleeding from the nose? To put a *cold* key down your back, and thus by the suddenness of the shock, change, in a moment, the whole corporeal temperature. Now this is all very well during the paroxysm—but what is to be done to *prevent* its *return?* The profession of the present day, almost to a man, bleed or purge you!—The following case may open their eyes, and as it is not from my own practice, but taken from a German Medical Journal of repute, it will, perhaps, carry more weight with it on that ac-

count. "A strong man, aged 27, suffered on alternate days from very violent bleeding at the nose, which continued from four to six hours, and could neither be stopped nor diminished by the usual styptics, nor by any of the other means commonly employed in similar cases. Taking into account the remarkable periodicity of the bleeding, the treatment was changed for a large dose of sulphate of *quinine* with sulphuric acid. During the twenty-one days following, the bleeding recurred but twice, and was then readily stopped. The patient subsequently continued quite well."—*Med. Zeitung, No.* 33, 1836.

In the case of a young lady afflicted with periodical *Hæmatemesis* or Vomiting of Blood, for which she had been repeatedly bled without the smallest advantage, I effected a rapid cure with a combination of Quinine and Alum. The same disease, I have again and again cured by Prussic Acid.

You will now, Gentlemen, be prepared to question the propriety of the usual murderous treatment adopted for *Hæmoptysis* or Spitting of Blood.—Is not the lancet in almost every such case, the first thing in requisition, and death the almost as invariable result of the measure? What say the older authors upon this matter?—Listen to Heberden, a physician, who, for upwards of thirty years had the highest and most extensive practice in London: "It seems probable (writes this veteran in medicine), from all the experience I have had of such cases, that where the hæmorrhage proceeds from the breach of some *large* vein or artery, *there* the opening of a vein will *not* stop the efflux of blood, and it will stop *without the help of the lancet,* when it proceeds from a small one. In the former case, bleeding does no good—and in the latter, by an unnecessary waste of the patient's strength, it will *do harm.* But if the opening of a vein be intended to stop a hæmorrhage, by deprivation or revulsion, may it not be questioned whether this doctrine be so clearly established, as to remove all fears of hurting a person who has already lost too much blood by a practice attended by the certain loss of more?" With which reasoning, Gentlemen,

I hope you all, by this time, most perfectly agree. But men who know nothing of the economy of the Human System, will sometimes dispute this matter with you by saying that their patients "make blood so fast," that they must periodically bleed them, to keep down the disposition to hæmorrhage. Gentlemen, these practitioners deceive themselves,—they are deluded into this false and fatal practice by the returning *febrile* fit—a fit that will recur and re-recur at more or less regular periods, while there is blood or life in the body—and the more frequent the bleedings practised in the case, the more frequently will this febrile fit come on, and with it, the very hæmorrhage which it is the object of their solicitude to prevent. Gentlemen, does it not stand to reason, that the more you debilitate the *whole body*, the more certainly you must confirm that ORIGINALLY WEAK CONSTRUCTION of the VASCULAR COATS, which constitutes the tendency to hæmorrhage? So far from being the consequence of any constitutional plenitude of the blood itself, hæmorrhage is only a natural effect of real weakness of the coats of the containing vessels of a part. So that not only is the theory of making too much blood absolute nonsense, but the measures which medical men have been putting in force, for centuries, in their treatment of hæmorrhagic diseases, have been almost all as fatal in their tendency, as the theory that led to them was, in principle, false. Need I say, that the same observation extends to blood-letting in the exactly analogous condition of vascular weakness, termed "threatened APOPLEXY." Look at the pale and exsanguined countenances of the unfortunate individuals, who, in either case, have been subjected to such cruel discipline, and tell me, if these poor creatures make too much blood?—Too much blood!—only place your finger on the artery of the wrist, and you will feel it jerking and compressible, like that of a female who has suffered from repeated floodings. Even during the febrile paroxysm, you may see by the circumscribed flush of the face, that the patient is actually dying of hectic or inanition. What fatal mistakes have not originated in the notion of making too much blood!—Do the partisans of

the theory know that you may bleed the most healthy man till he shall become constitutionally hæmorrhagic? that you may starve him, moreover, into the same state? This last we shall, in our next lecture, put beyond the shadow of a doubt—for we will shew you, when we come to consider the effect of *abstinence*, that the inmates of the Penitentiary were, in many cases, starved to death, and among the diseases which resulted from such starvation, "*apoplexy*" was a common one, and that when *post-mortem* examinations were made "fulness of blood" was found in the brain!—Gentlemen, can you doubt, for a moment, that the coats of the blood-vessels, like every other tissue of the body, *must be* equally implicated in the *general debility* that cannot fail to be produced by whatever abstracts from, or prevents the entrance of, the material necessary to the healthy organization of every part of the human frame? To bleed or otherwise debilitate a person having a hereditary predisposition to spitting of blood or apoplexy, is the most certain method to develope these diseases in their worst forms!—Yet this is the daily practice of the most eminent physicians! one among many proofs, that in the medical profession, Eminence is less frequently attained by *successful results* in practice, than by the dexterous employment of all those petty arts and petty intrigues which tell best with weak minds in the ordinary game of life. So far as practice is concerned, the eminent physician generally confines himself to the fashion of the day—the more especially, if that fashion be profitable to the apothecary; for in that case he is sure to become the fortunate *puppet* of those whose bread depends, not so much upon the cures they shall effect, as the quantity of physic they shall manage to sell. What a happy nation of fools must that be, which supposes that any class of mankind will put the interests of the public in competition with their own. Benighted and misguided people! you call upon men to relieve you from your sufferings, while you hold out to them the most powerful of temptations, to keep you on your sick-beds! You pay for physic, what you deny to talent—for *long illnesses*, what you refuse to a speedy

recovery! Do you think medical men angels, that you thus tamper with their integrity? Your very mode of remunerating them, forces them to be corrupt—and that too, at a moment when their numbers are so great, that could even one half of them live honestly the other half must starve! Hear Mr. Abernethy on this subject:—"there has been a great increase of medical men, it is true, of late years; but upon my life, *diseases have increased in proportion;*—that is a great comfort!"—to whom?—to the public or the profession!—When you call in the physician recommended by your apothecary, how can you be sure that he is not a confederate? or, that when the *farce* of a "Consultation" is gone through, you are not the dupes of an intrigue to plunder you? But you, Gentlemen, you are young and, as yet, uninitiated in the mysteries of a system as degrading to the profession of medicine, as it is fatal to suffering man—a system at once venal, cruel, unchristian, and inhuman.* To you then, who wish to practise your vocation in the spirit of honour and integrity, I need not require to say, beware of blood-letting and starvation, as remedies for hæmorrhage or apoplexy. For myself, I do not remember to have lost one patient afflicted with spitting of blood or other hæmorrhage of a constitutional kind, since I gave up the lancet in my practice—and years have now elapsed since I first ceased to bleed under any circumstance. Two cases which happened within a few days of each other, will explain my manner of treating *Hæmoptysis.*

CASE 1.—An old gentleman, aged 70 or thereby, sent for me for spitting of blood—he was also the subject of habitual asthma. I prescribed Hydrocyanic acid, which failed. I then gave him Quinine, and he spat blood no more.

CASE 2.—A female, aged 25, was affected in a similar manner. I tried her first with Quinine—her hæmorrhage

* This system of COLLUSION, to which, by the way, I alluded in my first lecture, has been so often exposed in the LANCET, LONDON MEDICAL AND SURGICAL JOURNAL, and other periodicals, that the man who could have the hardihood to deny its existence must be one of the most deeply implicated of the corruptionists.

increased. I then gave her Hydrocyanic acid, and she rapidly recovered from the moment she took it.

By the proper application of heat and cold in the different morbid conditions of the body constituting the *febrile fit*, and by the judicious exhibition of the chrono-thermal medicines during its remission, I have successfully treated every kind of hæmorrhagic disease. The same system of treatment has enabled me effectually to combat recent hæmorrhoids and many cases of varicose veins—and the mention of this recalls to my recollection the case of an aged female who had a painful *varicose* ulcer, for whom I prescribed the internal use of arsenic with almost immediate relief to her pain, and the subsequent cure of her ulcer.

It has ever been the policy of teachers and professors to affect to penetrate further into a millstone than their pupils—and, seeing that for the most part they know as little of their particular subject as those they pretend to enlighten upon it, so far as their own reputation is concerned they are doubtless right! The great millstone of the present day is the CHEST,—and Lænnec's bauble the divining-rod, by which our modern sages tell us they have obtained their knowledge of it. Gentlemen, if you believe them, the *Stethoscope* is the greatest invention of these times. By means of it you may discover every motion and change of motion that ever took place in the organs within the thoracic cavity, and some that never could take place in them at all. What an invaluable instrument must it be—that stethoscope! The enchanter's wand was nothing to it! Moses's rod perhaps came the nearest to it! But seriously speaking, just observe how gravely your hospital tyros hood-wink and hocus each other with the phrases "hypertrophy" here, and "atrophy" there; "caverns" in this place and "congestions" in that—to say nothing of "rhoncus" and "rale," "egophony" and "sybilus"—and heaven knows what other sounds and signs besides—sounds and signs which, in the greater number of cases, have as much of truth and reality as the roar of the sea with which the child deludes his fancy when holding a shell to his ear!

Gentlemen, we shall give you our own ideas on

DISEASES OF THE HEART.

Do not the subjects of every kind of Heart-affection tell you they are one day better, another worse? How shall we speak of diseases of this organ?—of palpitation and temporary cessation or remission of its action?—disorders constantly misunderstood, and as constantly maltreated. Complain but of flutter or uneasiness in any part of the Chest, the stethoscope—the oracular stethoscope is instantly produced. Astonished—in many instances terrified, the patient draws his breath convulsively—his heart beats rapidly—and the indications obtained by means of this instrument, at such a moment of doubt, anxiety, and fear, are registered and recognized as infallible. "Have we not," asked the late Dr. Uwins, "had too much talk of Heart-Disease since the stethoscope has come so generally into vogue?" And Dr. James Johnson, of whom we shall hereafter have occasion to speak, forgetful of some previous abuse which he took the trouble to bestow upon me for condemning the instrument as useless, is reported (LANCET) to have delivered himself in the following words at a Medical Society:—"It was a common error in young practitioners to consider the heart as organically diseased when its functions only were much interfered with, and *this error* has become *more general*, he was sorry to say, *since the stethoscope has come into use.*" Dr. Johnson confines his observation to *young* practitioners—himself not coming under that head,—but I have seen men as old as he make the same mistake, and those, too, enjoying a great reputation for stethoscopic sagacity.—Gentlemen, I have seen cases in which he himself made this mistake! and if he wishes me, I shall publish them.

Patient after patient—medical as well as non-medical,—have come to me with the *fatal scroll* of the stethoscopist—their hearts palpitating, their limbs trembling, as they gazed in my face, expecting to read there nothing short of a confirmation of their death-warrants;—yet of these patients, Gentlemen, many are now living and well, and laugh, as I hope to make you laugh, at both the instrument and its responses. How little must that man know of his duty

as a physician that would deprive a fellow-creature in distress of the balm of hope? how little can he appreciate the influence of the depressing passions on the bodily sufferings of the sick! Yet with these eyes have I seen, in the hands of the patient, the written announcement of his doom, which afterwards turned out to be as utterly unprophetic and false in reality, as in any case it would have been unwarrantable, whether in moral or medical ethics.

Let the practitioner withdraw his eye, for a time, from a mere symptom; let him observe how other muscles of his patient palpitate at times, like that of the heart, and act like that convulsively;—finding these symptoms to be remittent in every case, and complicated with others, all equally remittent, would he still persist in his small bleedings, his repeated leeches, his purges?—*measures of themselves* sufficient for the production of any and every degree of organic lesion he already fancies he has detected. Would he not rather reflect with horror on his past treatment, and endeavour, by another and a better practice, to enable his patient to escape the sudden death to which, in his imagination, he had devoted him? How many a physician, by such a prognostic, has obtained unmerited credit for foresight and sagacity, while he only taught the patient's friends to be prepared for an event *he himself was materially contributing to hasten!*

Gentlemen, I have seen two Stethoscopists examine a patient with supposed heart disease, and come to the most opposite conclusions,—one declaring the organ to be enlarged, the other assuming, with equal confidence, that it was the reverse! But the utter absurdity of attempting to distinguish during life, one form of Heart-affection from another by any particular sign or symptom, is sufficiently proved by this one fact, namely, that the chronothermal symptoms of every case come at last to the symptoms or shades of symptom of ague; and even could this diagnosis be effected to the nicety of a hair, such knowledge would *not* be worth a rush for any *practical purpose*—inasmuch as the remedies for every kind of chest-disease come at last to the same agency,—whether that agency be directly applied to the surface of the body

in the shape of cold or heat; or, be internally administered in the form of medicines that *galvanically* influence internal motion and temperature through the medium of the nerves. By the chrono-thermal system of practice, I have successfully treated every kind of heart-disease which ever came, or could come, under the notice of the physician,—setting aside, of course, original malformation of the organ.

The following case I give for the benefit of the stethoscopists:—R. H. Esq., aged 30, had for a long period been labouring under despondency of spirits, even to the shedding of tears; he suffered frequently from chilliness—particularly complaining of the coldness of his feet. He had, also, occasional palpitations of the heart, the action of which organ was generally below the healthy standard. He was better and worse upon particular days. An eminent London physician, who is looked upon as a great authority in cases of this kind, inasmuch as he has written a book on diseases of the heart, after examining him with the stethoscope, pronounced his heart to be so much enlarged, as to leave but little hope of a favourable result. This gentleman prescribed for him Carscarilla and Ammonia with aperients, and ordered him to be *bled*—the *bleeding* to be *repeated* every month or six weeks. So far, however, from deriving any benefit from this treatment, the patient's health deteriorated greatly;—he became much emaciated, and a tendency to fainting fits came on, with occasional confusion of his senses. His pulse was generally forty in the minute, but frequently intermitted. He complained of liability to spasm, and a peculiar repugnance to the slightest exertion. Such being his state when he consulted me, I prescribed a combination of prussic acid and creosote, which I afterwards followed up by arsenic and quinine,—and in about six weeks his health became so completely re-established as to enable him again to resume his profession, the Law, which he now continues to follow with ardour, and without a complaint of any kind*.

* A letter which I recently received from Dr. Selwyn, of Ledbury,

In confirmation of the value of Arsenic in disease of the heart, the following case from Darwin, who wrote, be it remembered, in the last century, will not be deemed unimportant:—"A gentleman, 65 years of age, had for about ten years been subject to an intermittent pulse, and to frequent palpitations of his heart. Lately the palpitations seemed to observe irregular periods,—but the intermission of every third or fourth pulsation was almost perpetual. On giving him four drops of a saturated solution of *Arsenic* about every four hours, not only the palpitation did not return, but the intermission ceased entirely, and did not return so long as he took the medicine."

The following Cases are two of many such which have occurred in my own practice:—

Case 1.—A young lady was afflicted with palpitation of the heart, occasional cough, and so great a difficulty of breathing as to be unable to sleep, except when supported with pillows. She had frequent shivering fits; her abdomen and legs were much swelled, and her symptoms altogether so distressing as to leave her friends with scarcely a ray of hope. Nevertheless by the employment of silver, quinine and prussic acid, she did eventually recover, to the surprise of all who knew her. Remissions were well marked in this case.

Case 2.—A young gentleman, aged 16, had violent palpitation of the heart, much headache, craving appetite, and some thirst, with great depression of spirits. He was much emaciated and had a tendency to eruption of the skin. His hands and feet, which were generally cold by day, became during the night so hot, as frequently to keep him from sleeping. By a course of cold plunge-baths, alternated with the shower bath, and by the use at the same time of quinine and iron in combination, he was completely restored to health—every one of the above symptoms having disappeared in a few weeks.

at whose request the gentleman first consulted me, gives me the news of his marriage. *Stethoscopically* he ought to have been dead and buried long ago!

We now come to consider

PULMONARY CONSUMPTION OR PHTHISIS.

When you see a patient harrassed with cough, and losing his flesh, and if, at the same time, he complain of shortness of breath and pain of the chest, and begin to expectorate a purulent looking matter, you may certainly set his disease down as *consumptive;* for not only is his general health in that case manifestly wrong, but his lungs are more or less implicated,—and what does it signify in which of their tissues? what does it signify whether it be their mucous membrane, their glands, or their parenchyma. If his general health, from the time he becomes your patient, improve, he will live as long as it continues to do so,—if not, and if it as progressively continue to get worse, he must die! Any further discussion of the matter, *quoad hoc,* resolves itself into the interminable question of Tweedle-*dum* and Tweedle-*dee!*

"Can Consumption be cured?" asked Mr. Abernethy, adding in his own sarcastic manner, "Odd bless me! that's a question which a man who had lived in a dissecting-room would laugh at. How many people do you examine who have lungs tubercular which are otherwise sound." What is Consumption?—It is *tubercle* of the lungs—then if those tubercles were healed, and the lungs otherwise sound, the patient *must get better;* but if the inquirer shift his ground and say "It was the case I meant of tubercles over the whole lungs," why, then he shifts his ground to no purpose, for there is no case of any disease which, when it has proceeded to a certain extent, can be cured."

The next question is, what are tubercles? I take this to be the true answer: For the requisite lubrication of the membranous lining of the pulmonary cells and other air-passages, there must be a certain amount of secretion. To supply this secretion, a great number of minute and almost imperceptible glands abound throughout the entire pulmonary tissue. Now, during constitutional disorder, these like every other gland in the body, are liable to become diseased, and even to run into abscess. This abscess, Gentlemen, is "tubercle," and the consequent disorganization of por-

tions of the lungs, by the successive enlargement and coalescence of a number of such abscesses, constitutes *Tuberculous Consumption*—the various stages of which are more or less gradually produced in the course of repeated *paroxysms* of general remittent disorder. The matter expectorated by the patient, consists of the contents of these tubercles, and is often mixed with blood; while the cough, sometimes the effect of a lodgement of matter in the air passages, is as often caused by the cold air coming in contact with the ulcerated surface of the diseased lungs.* To understand this subject in all its bearings, you have only to observe the more palpable changes which take place in the glands of the neck of certain patients. These glands, in the *healthy* living subject can neither be seen nor felt; but apply any general influence that shall excite *fever* in an individual predisposed to glandular disorder,—such as exposure to cold, or the abuse of mercury, and what do you find? Why, these very cervical glands gradually enlarge, form tumors, become decomposed, and finally terminate in abscesses, the contents of which, so far as appearance is concerned, are the identical contents of pulmonary tubercles, or *vomicæ*, as these tubercles are sometimes called. In the one case, the patient is said to have the "Evil" or "Scrofula," in the other Phthisis or Consumption;—the difference of place, and the degree of importance of this in the animal economy, making the only difference between them.

We now come to the question of Cure, and from what we have already said, you must be aware, that however cureable in the commencement Pulmonary Consumption, in the later stages,—that is where a very considerable portion of the lungs is destroyed,—cannot possibly be cured;—though even in this case, the disease by proper management, *may sometimes* be arrested. Gentlemen, instead of confusing you with fine-spun distinctions, the delight of the schoolmen,—I shall try to explain my meaning to you by *similitudes*, which, in the words of Fuller, are "the windows

* Mr. Jeffrey's Respirator I conceive to be an admirable instrument, not only as regards chest-disease, but also in toothache and diseases of the gums and fauces.

that give the *best lights.*"—Many of you doubtless have had a certain portion of a tooth slowly *consumed* by disease, which disease, [tooth *consumption?*] by some change in your manner of living, or otherwise, has all of a sudden stopped, and the remaining sound portion of that identical tooth has continued to be useful to you for years! Such arrest of the consumption of a tooth, I have often myself obtained by quinine internally administered, and Dr. Irving of Cheltenham detailed to me two cases in which he succeeded with that remedy. Well, then, with medicines of this class and sometimes even without any medicine at all, the same thing may take place in the lungs;—and I have known persons reach a good old age, who had portions of their lungs destroyed, but who, by proper medicine and attention to the temperature of their chambers, preserved the sound parts from going into further decay. Such persons, at greater or lesser intervals of time, may even be free from almost every symptom of Phthisis, and shall only commence to expectorate during some change of weather, when they have slight febrile attacks, but these will leave them again on the return of warm weather.

I have no wish to puff myself off as the only person in the world who has cured consumption. The disease, I shall shortly shew you, has been cured by others, though I am not so sure that they knew the principle upon which their remedies acted. The real nature of the complaint, I am satisfied, no author has ever explained *before me*;—if my explanation be admitted to be the correct one. The same power that will set a ship on the right course,—improperly applied will set it on the wrong. Now this is exactly the case with medicine; the same power that will cure a disease, in one person, will cause or aggravate it, according to circumstances in another. And yet do we not see this power daily wielded by medical men, who have not the smallest pretensions to a knowledge of the principle upon which their remedies act! No wonder you have such contrary accounts of the action of remedies in pulmonary consumption. The following case of the disease is from the pen of the patient, himself a physician,—I believe the late Dr. Currie, of Liverpool. It is given by Dr. Darwin in his Zoonomia.

"J. C. aged 27, with black hair, and a ruddy complexion, was subject to cough from the age of puberty, and occasionally to spitting of blood; his maternal grandfather died of consumption under thirty years of age, and his mother fell a victim to this disease, with which she had been long threatened, in her 43rd. year, and immediately after she had ceased to have children. In the severe winter, of 1773-74 he was much afflicted with cough, and being exposed to intense cold in the month of February, he was seized with peripneumony. The disease was violent and dangerous, and after repeated bleedings, as well as blisterings, which he supported with difficulty, in about six weeks he was able to leave his bed. At this time the cough was severe, and the expectoration difficult; a fixed pain remained in the left side where an issue was inserted. Regular hectic came on every day, about an hour after noon, and every night, heat and restlessness took place, succeeded towards morning by general perspiration; the patient having formerly been subject to AGUE, was struck with the resemblance *of the febrile paroxysms, with what he had experienced under that disease,* and was willing to flatter himself, it might be of the same nature; therefore he took bark in the interval of the fever, but with an increase of his cough." This patient eventually recovered by change of air and horse-exercise, the last a remedy held in high repute by Sydenham. What first induced Sydenham to prescribe horse-exercise for pulmonary consumption? Was it any knowledge he had obtained in the dissecting-room? No, Gentlemen, it was the same kind of experience that first taught the Peruvian savage the value of bark, as a remedy for ague; namely the observation of its good effects upon the living. You might dissect diseased bodies for ever, without even once guessing that either the one agency or the other, could beneficially influence any kind of disorder. See then the difference betwixt watching the action of external influences on *living bodies* and dissecting and hair-splitting the broken down organs of *dead ones!* What comes of Lord Brougham's assertion, that the only good medical education is to be got in the dissecting-room? The relationship existing between Phthisis and Ague is

not only established by the heats, and the remissions and exacerbations of the above case, but also by the remedies that proved successful in its treatment,—horse exercise, and change of air having cured agues, which had resisted every kind of internal medicine, bark, among the number;—so that bark is no more a specific for ague, than for any other disease. Were you to judge solely from the experience of the above case, in which the bark not only failed, but actually aggravated the symptoms you might be led to conclude, that it ought never to be exhibited in consumption; but you will remember that the same is every day the effect of its employment in ague,—in which latter disease, we therefore dismiss it for arsenic, opium, iron, or some other agent, which may better answer the peculiar habit of the patient, and which we cannot know until you try. Never take an estimation of a remedy from its success or failure in one case.

In the 13th volume of the Medical Gazette, you will find the detailed case of a man labouring under Consumption, for whom the gentleman who narrates it prescribed generous diet and quinine. Dr. Marshall Hall examined the patient with the stethoscope, and pronounced an unfavourable prognostic. Even after commencing the quinine, and when a considerable improvement had taken place in the appearance of the patient, Dr. Hall still held that the case would be fatal;—"again the stethoscope was consulted—again it uttered the same sepulchral responses; and according to it, the poor patient ought by this to have been moribund, his pulse, good looks, muscular firmness, appetite and high spirits notwithstanding. I need hardly add, (says the narrator of this case,) that our judicious friend the doctor, was much surprised, as well as gratified, to witness his appearance—alluding to the change after the cure had taken place. Justice to Dr. Hall compels us to say, that in another number of the same journal, he questions the *cure*. But it is enough for our present purpose, that he admits *suspension*, and if this suspension was continued for a series of years, it is not worth while to enquire whether the patient was cured or not. In fact, the matter would resolve itself into a mere dispute about words.

With quinine and other chrono-thermal medicines, I am satisfied I have cured or arrested at least five hundred cases of consumption, many of them too, in apparently very advanced stages. The stethoscopists will of course question this, and ask how I could know, without using their instrument. I shall therefore give them a case of this kind in which it was employed, not by myself, but by men who have the reputation at least of being wonderfully quick in the use of it:—A pianoforte maker, aged 36, came to me much emaciated: he complained of shiverings, chills and heats, night sweats, cough, and expectoration of matter, tinged with blood occasionally; he informed me that he had been a patient at a provincial dispensary, from which, after having for some months taken much medicine, and been repeatedly blistered, he was discharged as incurable. The stethoscope he informed me had been consulted in his case by Drs. *** and ***, both of whom told his wife he was in the last stage of consumption, and there were no hopes. I prescribed hydrocyanic acid, two drops to be taken three times a day, and ordered him to take a pill, containing a combination of opium and quinine, at that period of the day, when he should find himself most free from the symptoms of his disease. From that day, he began to recover his flesh and spirits; his pulse, which was 120, gradually fell to 80, his appetite improved daily, his expectoration diminished in proportion, and in about three months he returned to his work, without any complaint whatever. I must not omit to add that I ordered him to apply a galbanum plaster to his spine, in which he had suffered from chills, and which it effectually stopped. A year afterwards, I saw him again,—when in the presence of Dr. Selwyn, of Ledbury, he told me he was quite well, and was still at his work, and he expressed to me his gratitude for my successful efforts in his favour. Now, some will say this case was consumption and some not, for when the patient dies nobody disputes it, but when he gets well every body does;—some again may learnedly give us to understand that the disease might break out again at some future period, say five or six years after,—which I am ready to grant; and what is more, to admit may happen

after a cure in any disease; and so may a fracture that has been set in the best possible manner, so that you could not tell that the limb had ever been broken, become in the course of years and constitutional change, disunited again; as you may find, if you will read the accounts of the diseases of the sailors, who accompanied Lord Anson in his voyages.

I will just give one case more, illustrative of the success attending the chrono-thermal mode of treating phthisis. A maid-servant, 25 years of age, the subject of consumption, had been an out-patient at the same dispensary for several months, during which she had been bled, leeched and blistered, but as she found herself daily getting worse, she came to me; she was then spitting blood and matter; her pulse was quick and small; she had chills and heats and night sweats, with severe cough. I prescribed hydrocyanic acid, as in the above case, with opium and quinine during the remission; with this treatment she recovered completely, and though four years have elapsed, she has had no return of her disease.

When I first entered into private practice in this country, I was much abused for giving prussic acid, and that too by individuals, who afterwards ordered it in their own prescriptions. All I can say is, it is a most valuable medicine; but like fire or hot water, it is not to be left at the mercy of fools or children; inasmuch as like either of these agents, it may *warm* you in one degree, and destroy you in another. Moreover, it will not agree with all patients, some complaining of increase of cough after using it. Well, this you cannot of course know till you try, and therefore you will suit your patient's constitution, as best you can—for in the words of Bacon, "a wise physician doth not continue still the same medicine to a patient, but he will vary if the first medicine doth not apparently succeed—for of those remedies that are good for the jaundice, stone, agues, &c., *that* will do good in one body which will *not* do good in another —*according to the correspondence the medicine hath to the individual body.*" Is not this matter of every day's

experience? How can we tell before we try, whether opium will set a person to sleep or keep him awake all night? or that prussic acid will aggravate consumption in one case and cure or ameliorate it in another? The difference in the *galvanic* condition of the brain of different patients, I take to be the reason. At all events, whatever be the true explanation of these facts, they shew, at least, the utter impossibility of foretelling, in numerous cases, by what remedial agency you can accomplish a given object—and they will also demonstrate to all who have even the very least pretension to common sense the imposture daily practised by the charlatan when he puffs his nostrum as a universal remedy. But so far as regards prussic acid, its good effects in numerous cases of consumption are unquestionable. On the Continent, Magendie, among others, "asserts and maintains" that, with this acid he has cured individuals "having all the symptoms of incipient phthisis, and even those in a more advanced stage." Dr. Frisch, of Nyborg, in Denmark, has also employed the remedy successfully in Consumption. But, Gentlemen, prussic acid is equally influential as a remedy for ague, and I have administered it with the most perfect success in cases of that disease after they had resisted quinine and arsenic. Dr. Brown Langrish too, with laurel-water (the virtues of which depend upon the prussic acid it contains,) cured many cases of obstinate ague. The principle upon which it acts in both diseases I need not say is one and the same—namely, its power galvanically to influence the motion and temperature of certain parts of the body through the medium of the brain and nerves. People who have accidentally taken an over-dose will tell you how they felt as if they had had an *electric shock*. Whatever produces a sudden impression upon the whole frame causes such shock. Whatever acts upon it more slowly does the same *in effect* as galvanism or electricity slowly and gradually applied. How otherwise can you influence the body in disease

> "With drugs or minerals
> That *waken motion!*"—SHAKSPEARE.

The action of such substances I do not require to tell you

is any thing but *mechanical.* What then can it be but *electrical* or *galvanic?* To call it chemical or magnetic is only an admission of my position, for these have been proved by Mr. Faraday to be mere modifications of the same great principle. We can now understand how galvanism and electricity may be directly and advantageously employed in every disease which has obtained a name, ague and consumption among the number. While upon the subject of consumption, I may mention that I have derived great benefit in many cases from arsenic and silver, and also from subcarbonate of potass in its treatment,—and in four or five cases which resisted many remedies, a combination of stramonium and belladonna arrested for a time, though it did not ultimately cure, the complaint. In many cases in which you will be consulted, the disease may have proceeded so far as to make cure impossible—in other cases, which might seem to admit of this desirable end, circumstances, over which you have no control, will prevent it. Do you think you could cure a person of any grave disease if he were everlastingly on the eve of bankruptcy,—or who lived in an atmosphere which disagreed with his health generally, or who had a wife continually scolding him and making him miserable? In such cases need I say you will have some difficulty to give even a temporary benefit in consumption.

There is a phrase at present so much in fashion, that were I all at once to tell you it was absolute and indisputable nonsense, you would, in all probability, stare with astonishment. Gentlemen, did you ever hear of *Brain*-cough, or *Ear*-cough, or *Eye*-cough?—No!—But you have, of course, heard two doctors discussing with the greatest gravity imaginable, whether a particular complaint was incipient consumption or "*Stomach*-cough," as if people in these days coughed with their stomachs instead of their lungs! Only let a fashionable physician give currency to this kind of false coin, and it will pass for genuine, till some suspicious character like myself shall submit it to an analysis at the mint of Common Sense, and then—what then?—Why, people will scarcely even then believe the evidence of the whole of their five senses put together,—

for, as some one says, when the gullible public, "once get hold of a *lie*, they become so enamoured of it that nothing but death will make them part with it." Who it was that first introduced the phrase "stomach-cough" I do not know, but Dr. Wilson Philip, at all events, insisted that "indigestion or dyspepsia is the remote cause of a variety of consumption;" and in proof of this he tells us he has cured it with minute doses of mercury. Now, if this were any proof of the *origin* of a disease, every disease in existence might be termed a "stomach affection;" for I scarcely know a complaint however grave which I have not myself cured by the same medicine;—aye, and seen aggravated by it too. In the latter case, of course, it could not be a "stomach disease." "Direct your attention," says Dr. Philip to the digestive organs, and you will improve the subject of "*dyspectic*-phthisis." And so you may if you direct your attention to any other part of the body of a consumptive patient,—for what part of the body of such a patient performs its functions correctly? Are not his feet and hands cold and hot by turns, his skin one moment harsh and dry; another, bedewed by a cold and clammy sweat? Are these causes or *coincidences?* May you not as well say, cure the consumption and the digestive powers will improve, as cure the digestion and you will stop the phthisis? Medical men constantly talk of indigestion as an essence or entity having features separate and distinct from all other disorders. Can any person, I ask, be the subject of any disease without his digestion being more or less implicated? What becomes of your digestion in *fever?* Or when you get bad news just as you are about to eat your dinner? Though you were as hungry as a hawk a moment before, your appetite would leave you then. Gentlemen, have we a *Brain* or have we not? Give a man a blow on that, and see what becomes of his digestion? How much the workings of this organ have to do with the functions of the stomach we have a lesson in the play of Henry VIII. Mark what the fiery monarch says to Wolsey when surprising him with the proofs of his treachery—

——" Read o'er this,
And after, this; and then to breakfast
With what *appetite* you have."

Do you doubt that the Cardinal's *breathing* would be as much affected at such a moment as his appetite? See then the absurdity of placing naturally *coincident* circumstances in the light of cause and effect! Shakspeare knew the influence of a passion upon the *totality* of the body better than half the faculty, and I am not sure that he could not have prescribed to better purpose than them all put together. Do you think that in cases of this kind he would have troubled his head about the digestive organs, or that he would have said, like many of the great doctors of the day, "we must put the stomach and bowels to rights!" Certainly not; he would have made the brain his first care;—he would have first tried to soothe and comfort that, and then he would have expected the appetite to return. Now, Gentlemen, that is what you ought to do in all complaints, indigestion and consumption included. Every organ of the body is of importance in our economy, —but the brain is *so* important an organ that people can not live a moment without it, and whatever affects it, for good or for evil, equally for good or for evil affects every other part of the body,—the lungs as much as the stomach. Now, it is only through the medium of the brain and nerves that mercury can influence the diseases of these two last mentioned organs, whether advantageously or the reverse; and as I have told you before, it can do *both*,—according to the correspondence and *fitness* it hath for individual bodies, and the *scale* or *degree* in which it may be administered. But upon the subject of appetite the greatest nonsense prevails, even in the profession. You hear that such a one is ill—very ill,—but thank heaven! his appetite still keeps "good." How then is it that the patient continues day by day to waste and become skeleton-like? It is because that man's appetite, so far from being "good—nay excellent," is *morbidly voracious* and craving, having as much resemblance to the appetite of health as the diabetic flow of urine has to a useful and perfect secretion from the kidneys. No man can possibly be the

subject of disease of any kind without his digestive organs partaking in the general *totality* of derangement. Whatever can improve the general health in one case may do the same in the other. Now, though the chrono-thermal remedies, judiciously administered *during the remission*, may of themselves singly cure almost every kind of disease,—yet it is my custom to combine and alternate them, as I have already said, with such medicines as experience has proved to have more or less affinity to the particular parts of the body most implicated in a given case,—mercury, iodine, purgatives and emetics, for example,—inasmuch as the cure may thereby, in many instances be at least accelerated. The well-ascertained influence of mercury and iodine on the glandular and assimilative nerves, naturally points to those two medicines as being the most proper for consumption; and I feel it my duty to state to you that I have often availed myself of their beneficial influence in that disease. That they can produce it in cases where they prove constitutionally injurious, you will scarcely doubt, when you consider that whatever may injure the general health of a person predisposed to phthisis, may as certainly bring out that weak point of their frame. Instances produced by both, more particularly mercury, I have too often been compelled to witness. How terrible then that such powers should be daily wielded by men who know nothing of the principle of their mode of action!

The generality of practitioners, in detailing the most strikingly remittent phenomena, manage so to word them that you cannot distinguish whether they be remittent or not. The more intelligent non-medical writer will often convey in his unsophiscated English the precise bearings of a case. Take an instance from Captain Hall's narration of the illness of the Countess Purgstall:—"Our venerable friend," he says, "though she seemed to rally, and was certainly in as cheerful spirits as ever, had gotten a severe shake; her nights were passed in coughing, *high fever*, and sharp rheumatic pains,—but in the *day-time she appeared so well*, that it was scarcely possible to believe her dying, in spite of her constant assertion to that effect."

(*Schloss Hainfield.*) Now, in such a case as this, would not the responses of the stethoscope differ materially according to the times they were taken? The indications obtained through its medium could not possibly be the same by night as by day.

Gentlemen, connected with this subject, I may mention that it was the fate of a little work of mine* to be criticised in two medical periodicals, [*The Medico-Chirurgical Review*, and *The British and Foreign Medical Review*] the editors of which would appear to have rivalled each other in the scurrility of the language with which they thought it necessary to denounce my pages. Not content with misstating and misrepresenting the matter of the volume, they resorted to personal abuse of its author; my open contempt of their wooden idol, the stethoscope, would appear to have fired them with a common indignation, —for, while Drs. Conolly and Forbes, conductors of the one review, with rare courtesy made this a reason for pointing out to me "the advantages of common sense over the want of it," Dr. James Johnson, editor of the other, in an equally polite manner, charged me with "profound ignorance and inveterate prejudice."

This language so evidently the offspring of bad blood and low breeding, I at one time determined to treat with contemptuous silence; but when I reflected how few comparatively speaking, are aware of the manner in which the medical criticism of this metropolis is managed, and that the Reviews in question, are only part of the corrupt machinery, by which Mediocrity and Mendacity have been too often enabled to usurp the place and emoluments of Genius, I took an opportunity of replying to the conductors of both publications, through the medium of the Lancet.† To that answer one only of the parties, Dr. James Johnson, put in a replication, but whether he gained or lost by the line of conduct he pursued, I leave to his own warmest advocates to decide. Drs. Forbes and

* Fallacy of the Art of Physic, as Taught in the Schools. Longman and Co., 1836.

† For an exposure of the profligacy of these and other London Medical Reviews, see the LANCET *passim*

Conolly to this hour have never attempted to invalidate either my facts or reasoning, though in a recent number of their periodical, they have taken care to repeat their abuse of me—a sure sign that they still smart under the effects of the castigation they received at my hands.

The utter inutility of the stethoscope, as a diagnostic instrument in diseases of the heart, I have already, I presumed, proved to the satisfaction of every body, but the casuist and the caviller.—I will now enter into some investigation of its merits, as connected with the subject of pulmonary consumption.

Permit me, I said, to my polite critics, to ask you a plain question.—Since this instrument came into fashion, has the physician been able to bring pectoral, or any other disease to a more favorable termination than formerly? Hitherto, I never could obtain but one answer to this question, and that answer was always a negative. But softly, you will say—has it not taught us to discriminate and distinguish one disease from another! Admitting for the present, that such is the fact, (which, however, I shall shortly disprove) of what use I again ask, is such discrimination, such change of one kind of *verbiage* for another, if it lead to no difference or improvement in practice—if our remedial measures, for all shades and variations of pectoral disorder, come at last to the same agency. What is it but a vain waste of time in splitting straws, to attempt to distinguish by some nice *auricular* sign, severe disease of *one* tissue of the pulmonary substance from another, if the proper treatment of every kind of chest disorder be the same? If you reply it is a satisfaction to know, whether the disease be *curable* or not, I give you for rejoinder, the fact that where the symptoms are so grave as to be with difficulty distinguished from consumption, the disease in that case, may either like consumption, under certain circumstances admit of cure, or like the same disorder in its very advanced stages as certainly terminate in death.

"Rush, Portal, and the most judicious physicians, (says Dr. Hancock) have constantly regarded consumption to

be a disease of the constitution, *not consisting merely* of *ulceration* or loss of substance in the lungs—of course not to be disposed of by stethoscopes or any oracular mummery. Hence too, we see the reason that consumption formerly, in the times of Morton, Sydenham, Bennet and others, was not regarded as an incurable disease." Let us nevertheless for argument's sake, allow that a knowledge of the exact amount of pectoral decomposition, could be turned to some useful or practical account; are my critics so certain that the stethoscope is adequate to the detection of this? Andral, an authority to whom "pathologists" on all occasions implicitly bow, candidly admits its deficiency. "*Without other signs*, (he says), the stethoscope does *not* reveal with certainty phthisis and inflammations of the heart." And Dr. Latham who has taken no small pains to advocate its employment, admits that the best auscultators even have been led to a wrong prognostic by it. "To most patients, (he adds), I fear it is a *trouble and distress*." Now this is just the reason, why I repudiate its assistance;—whatever troubles and distresses the patient must not only alter all his cardiac and respiratory movements, so as to neutralize the whole indications presented by them; but must actually aggravate the state of his system throughout, and by consequence, instead of tending to the relief of the part most implicated, must further increase its diseased state. Well then, as the information obtained from the stethoscope must, from the nature of things, be as hollow and empty as the toy through which it proceeds—and as the discovery of the degree of organic lesion, even could it be known to a nicety, can *in no instance* lead to practical improvement, I am content to judge of it from the patient's general appearance, the number of his respirations, and the sounds emitted, when he speaks, breathes and coughs as appreciable by the naked ear. From an instrument whose employment *troubles and distresses the majority of patients*, I look for no superior information.

Gentlemen, we are all liable to trust too much to our Ears. Depend upon it, we will do better, in diseases of the chest, as on most other occasions to examine things

with our Eyes. When you are consulted about disorders of that cavity, watch well the physiognomy of the patient —see whether his respiration be hurried, or the reverse, whether he has lost flesh or begins to gain it; and from whatever part of the lungs the matter expectorated may proceed, you can be at no loss for the proper principle of treatment;—your eyes will soon tell you whether he gets better or worse—whether you are to continue a medicine, or change it for another—more than this

——" There need no words, nor terms precise—
The paltry jargon of the *teaching* mart,
Where PEDANTRY gulls FOLLY;—we have EYES."

Well then, let us use these to advantage in watching external signs, instead of mispending time in attempting to make out through the *false medium* of a piece of wood, the ever varying motions of the interior.

Gentlemen, recur to Nature and you will find that chest-affections, like every other, are *remittent* disorders. Under these circumstances quinine and opium are of infinitely more avail than all the discussion and discrimination of all the doctors that ever mystified disease by their vain nasologies! What cares the patient about the alphabetical combination, by which you baptize his disease, if you cannot make him better; and if you succeed in curing him, what does it signify, whether you call it one name or another? Is it not enough to know that the disease was in the chest and that your treatment was judicious? So far as result is concerned, the wise physician, even when despairing of success, will do well to guard himself against a too decided prognostic in any case. How often have I heard patients, who had formerly suffered from chest-disease, boast that they had *lived* to cheat their doctor of the *death*, to which he had theoretically doomed them—aye, and that doctor a stethoscopist!

It is truly amusing to find men playing the critic, without the smallest pretension to the knowledge requisite for such an office. So ignorant was my *Medico-Chirurgical* Reviewer, Dr. James Johnson, of one of the most universal laws, both of health and disorder, as to accuse me of a

limited grasp of my profession for making Fever,—" not fever in the large sense of the word, but only *remittent* fever," my primitive type of all disease. He chuckled that he could confront me with the school-boy term, " *continued* fever," " fever in the LARGE sense of the word;" but according to a living professor, Dr. A. T. Thomson, " in *continued* fever in almost every case, there is an exacerbation towards mid-day, and the REMISSION towards morning. Another cotemporary Dr. Shearman, says, " an *Intermittent* is the most perfect form of fever, having the most complete periods of accession and intermission. The *Continued* fever *as it is called*, differs from this only in its periods being less perfect and the stages of its curriculum less obvious." So that my preference of the *perfect* rather than the *im*perfect form of fever for my type of all disease, was in the eyes of Dr. James Johnson so great a blunder, that he not only condemned my doctrine *in toto*, as a *Pyrexy-Mania* or fever-madness, but assured his readers, that my madness had a method in it. Gentlemen, whether or not Dr. Johnson's own practice does not better deserve to come under the head of madness, savoring moreover of a rather *sanguinary* and homicidal type of it—we shall have an opportunity of shewing you, when we come to treat of Dysentery. Meantime I may observe, that

" THO' I hope not hence unscathed to go,
Who conquers me shall find a stubborn foe;
The time hath been when no harsh sound would fall,
From lips that now would seem imbued with gall,
Nor fools, nor follies tempt me to despise
The meanest thing that crawls beneath mine eyes,
But now so callous grown, so changed since youth
I've learned to *think* and sternly *speak* the Truth,—
Learned to deride the CRITIC'S starch decree,
And break him on the wheel he meant for me;
To spurn the rod a scribbler bids me kiss,
Nor care if courts or crowds applaud or hiss."*

GLANDULAR DISEASE.

Having already adverted to GLANDULAR DISEASE, I

* English Bards and Scotch Reviewers.

will just shortly observe that, whether involving some large gland, such as the liver, pancreas, or spleen,—if the last-mentioned viscus be indeed a gland, or taking place in the glandular apparatus of canals, the lachrymal and biliary ducts, the eustachian, salivary and urinary passages, for example, such disorders may all be advantageously treated by the various chrono-thermal medicines, and more certainly so, if combined with minute doses of iodine, mercury, and other remedies which have a well-known glandular affinity. Disorders of the absorbent glands, whether situated in the neck, axilla, or groin, or in the course of the mesentery, are for the most part termed "scrofula," and by some practitioners presumed to be incurable,—than which nothing can be more erroneous, unless it be the system which renders them so;—the application of leeches to the tumors, and the purgatives so unsparingly employed by many in their treatment. All these various diseases are features or effects of remittent fever;—by controlling which by the chrono-thermal agents, they may all, in the earlier stages, be at once arrested, and some, even of the latter, may be perfectly cured by a combination of these remedies with mercury or iodine. I could give cases innumerable in proof of this, but we have already so well established the principle in other cases of structural disease, and have still further to illustrate it in the disorders which we are about to enter upon, that we shall not detain you further on this matter, than to state the fact as we have found it,—a fact which your own after-experience will enable you to confirm, with only a common-place share of observation and sagacity.

CONSUMPTIVE DISEASES OF JOINTS.

Very much akin to Consumption of the Lungs are various diseases which, from their external manifestations, have been too long left under the exclusive dominion of the surgeons, namely, those destructive affections of the joints which so often bring the subjects of them to the amputating table. I forget the particular operative eminent who thanked God he knew nothing of physic! Such a con-

fession was very proper for a butcher—for the barber-surgeons of former ages;—but the man who prefers the honest consciousness of saving his patient from prolonged suffering and mutilation, to the spurious brilliancy of a name for "Operations" will blush for the individual whose only title to renown was the bliss of his boasted ignorance, and a mechanical dexterity of hand unenviably obtained by an equally unjustifiable waste of human blood. What would such a person say to the following cases?

CASE 1.—Harriet Buckle, seven months old, had what is called a scrofulous elbow. The joint was much enlarged, red, painful, and pervious to the probe, with discharge. The patient was the subject of *diurnal fever*. Notwithstanding the assurances of the mother that amputation had been held out as the only resource by two hospital surgeons under whose care the child had previously been, I confidently calculated on success. A powder containing calomel, quinine, and rhubarb, in minute doses, was directed to be taken every third hour. The case was completely cured in a fortnight without any external application.

CASE 2.—A young gentleman, aged 11, had enlarged knee, with great pain and heat, which came on in paroxysms. Leeches, blisters and purgatives had all been ineffectually tried by his surgeon, who then proposed amputation; the boy's mother hesitated, and I was called in. I prescribed minute doses of calomel and quinine. From that time the knee gradually got better, but stiff-joint was the result,—*anchylosis* or adhesions having taken place before I was consulted.

CASE 3.—A boy, aged 6, began to lose flesh, to walk lame, and to complain of pain of knee, stooping occasionally to place his hand upon it when he walked. There was some alteration in the appearance of the hip of the same side, when I was requested to see him. I adopted a similar treatment as in the above case, and the child rapidly recovered his health, with the complete use of his limb. He had been previously seen by a surgeon, who rightly pronounced the case to be one of *Hip-disease*.

CASE 4.—A girl, aged 12, had enlarged ancle, with an

open ulcer leading into the joint. Amputation, according to the mother, was looked upon as the inevitable termination of the case by two surgeons, under whose care the patient had been for twelve months previously to my seeing her. With small doses of quinine and calomel, the girl regained her health, and the ankle got well in six weeks.

The curious in nosology might demand the names of these various diseases. Will they be content with the simplicity of JOINT CONSUMPTION? Truly in surgical authors they may find verbiage enough to distinguish them all, such as "scrofula," "white swelling," "*morbus coxarius*," "the evil," &c., but whether or not these words, be explanations, I leave to more learned heads than mine to decide.

There is not a disease, Gentlemen, however named or by whatever caused, of which the most perfectly periodic examples might not be given, and the only difference between them in this type, and the more apparently continued forms is that the periods of the latter are less perfect, and the stages of their curriculum less marked than in the former. No physician will doubt that a purely periodic disease, whatever be its nosological name, partakes of the nature, and is more or less amenable to the treatment successfully followed in ague. Why then deny that the same disease, when less obviously periodic, partakes of that variety of ague misnamed *Continued Fever*, since all disorders like it have remissions and exacerbations more or less perfect in character throughout their whole course? What are such diseases but varieties of the more purely intermittent type? And what are the remedies found to be most beneficial in their treatment, but the remedies of most acknowledged efficacy in simple ague?

Remission and paroxysm are equally the law of what are termed local diseases, as of the more general symptoms which are supposed to be the exclusive province of the physician. John Hunter seems to be the only surgeon who has remarked this:—"Exacerbations," he says, "are common to all constitutional diseases, and would often appear to belong to many local complaints." Gentlemen, they belong to all. You may observe them even in the

case of disease from local injury; and here I may give you an instance in illustration of this, contained in a letter to me from Mr. Radley, of Newton Abbott, Devon, a gentleman well-known for his improved method of treating fractures. It is as follows:—"Many thanks to you for the 'Unity of Disease,' which contains in it more of the true philosophy of medicine than any book I have ever yet seen. There are some passages that threw me into an extasy of delight on reading them. On the other side I send you a case strikingly illustrative of the truth of your new doctrine, and one that was presented to me in my own favourite class of subjects. It was not elicited by inquiry, but thrust most unexpectedly upon my notice, and had not your work prepared me for such a fact, I will be so candid as to say the fact would have been lost upon me:—"G. Manning, aged 42, fractured the tibia on the 2nd. instant. It was a simple fracture, with much contusion. To soothe the pain, he had a solution of morphia after the limb had been laid on a pillow. When three days had elapsed, he still complained of pain, and on my inquiring where he suffered most, 'Why, zur, 'tis very curious to me, for the pain comes every twelve hours *quite regular*, about midnight; when it lasts one hour and a half or two hours, and again in the middle of the day.' The patient is now doing well under *bark*."

Every surgeon of experience is aware of the severe and occasionally fatal operations resorted to for the purpose of obtaining a reunion of fractured bones in particular constitutions,—of the setons which have been passed between their ends, and of the knives and saws by which they have been scraped and pared,—those horrible local means for constitutional causes. Dr. Colles of Dublin, and Mr. Bransby Cooper of this city, deserve well of mankind for the introduction of a constitutional mode of treating such cases. In the hands of these surgeons mercury internally exhibited has enabled patients of this kind to obtain a perfect reunion of their fractures. Several years ago, while in medical charge of Her Majesty's 30th Foot, in the East Indies, it was my fortune to obtain the same

satisfactory result, in the case of a soldier of that regiment, by the exhibition of quinine. The man had remittent fever,—the true constitutional reason why fractured bones refuse to unite under ordinary means.

Gentlemen, inquire of the subject of Goitre or other tumor; question the unfortunate persons who ask your advice in cases of cancer; such as suffer from abscess or ulcer, or those even who consult you for the true aneurismal tumour of an artery, and each and all will admit that they are one day better, another worse; that their *swellings at intervals decrease*, that their ulcers become periodically more or less painful,—that the size of both varies with the variations of heat and cold, damp or moisture of the weather, that their diseases are often materially influenced by a passion, or by good or bad news,—that in the commencement, at least, there are days, nay hours of the same day, when they have a certain respite from their pain and suffering, and that they all experience in their bodies the thermal variations which we call fever, some referring these last to the head or back,—while others associate them with the chest, loins, arms, or feet. Gentlemen, can you doubt the advantage of pursuing a chrono-thermal system of practice in such cases?

For the present we must pause. Our next business will be to explain the meaning of the word Inflammation, and to expose the terrible errors daily committed in the treatment of cases so called. Nor shall we have any difficulty in proving, even in the face of much prejudice, the bad effects of bleeding, leeching, and starvation. The cases of Byron, Scott, and Malibran, which we purpose in our next lecture to analyze, will doubtless set you all a thinking.

N.B. Next Lecture will appear on the 1st. of February.

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LECTURE IV.

FALLACIES OF THE FACULTY,

BEING THE SPIRIT OF THE

CHRONO-THERMAL SYSTEM.

BY

SAMUEL DICKSON, M.D.

FORMERLY A MEDICAL OFFICER ON THE STAFF.

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FALLACIES OF THE FACULTY.

LECTURE IV.

INFLAMMATION—BLOOD-LETTING—ABSTINENCE.

GENTLEMEN,

WHEN medical men first hear that I am in the habit of treating all kinds of disease *without* Blood-letting, they generally open their eyes with a stare, and ask me what I do in INFLAMMATION? Inflammation!—who ever saw any part of the body *on fire*, or in FLAMES? for the word, if it means anything at all, must have something like that signification. To be sure, we have all heard of "spontaneous combustion," but I confess I never saw it, and what is more, nobody that ever did! What, then, is this inflammation—this term which our "great" modern doctors so dogmatically assure us is the "head and front" of every corporeal disorder? Gentlemen, it is a metaphor merely—a theoretic expression, which,—torture it how you please—can only mean a higher action and temperature in the moving matter of a given structure, than are compatible with the healthy organization of that structure. When you find a considerable degree of heat and tumefaction, with pain and redness in any part, that part in medical language is *inflamed*. Now, what are these phenomena but the signs of approaching structural *decomposition?* In the slighter corporeal changes, the coincident variation of temperature is for the most part inappreciable; but whenever there is the least tendency to decomposition, the thermal change becomes a most prominent feature. The phenomena of inflammation, consisting as they do, of a much greater degree of heat and motion than are characteristic of the atomic revolutions of health, very closely resemble the chemical phenomena which take place preceding and during the decomposition of inorganic substances. Now, when this inflammatory action proceeds unchecked, the result in most cases is a tumor, containing *purulent matter*—or a

new fluid compound, differing materially from the original tissue, in which it chanced to become developed. This tumor, we call *Abscess.* And how is it to be cured? In many instances, the matter escapes by an ulcerated opening of the integuments — while in others, the knife of the surgeon requires to be used. In either case, the part in which the abscess was situated, recovers by the reparative powers of nature. But, there is yet another mode in which a cure may be effected, namely, by *Absorption;* that is to say, the matter of the abscess may be again taken up into the system, and by the inscrutable chemistry of life, become once more a part and parcel of the *healthy* fabric of the body!—being, thus, again reduced to the elements out of which it was originally formed. How analagous is all this to the operations of the chemist, who by means of the galvanic wire having first reduced *water* into its elemental gases, again converts these, by the very same means, into the water from whose decomposition they proceeded! Such, and many more, chemical operations, Nature daily performs in the animal body; and that she does all this through the electric or galvanic medium of the *brain* and *nerves,* cannot possibly admit of dispute, when you come to consider that under the influence of a passion (the most unquestionable of *cerebral* actions), large abscesses, and even solid tumors, have often completely disappeared in a single night. Gentlemen, there is not a passion,—grief, rage, terror, or joy,—which has not as effectually cured abscesses and other tumors, as the most powerful agents in the materia medica. The writings of the older authors abound in instances of this kind. But there are yet other terminations to the inflammatory process. For example, after having proceeded, to a certain extent, in the way of change, but still falling short of actual purulent decomposition, the atoms of the inflamed part, by the renewal of a healthy condition of the body generally, or by the direct application of cold or other agency, may again, with more or less quickness, subside into the degree of motion and temperature characteristic of their natural

revolutions. This termination is called *Resolution.* When the inflammatory action is more than usually rapid, the result may be the complete death of the part implicated; a black, inorganic mass being left in the place of the tissue which it originally composed. This we term *Mortification,* or *Gangrene.*

But, Gentlemen, medical men extend the term inflammation to some other morbid processes which, under the various names of Gout, Rheumatism, and Erysipelas, we shall, in another lecture, have the honour to explain to you. A great many books have been written upon the subject of inflammation, but I must own I never found myself one whit the wiser after reading any of them. Their writers, in almost every instance, use language which they do not themselves seem to have understood,—otherwise they would have confined themselves to one sense, instead of including under the same term, states the most opposite. Were I to tell you that the word "inflammation" is used by many writers when a part is more than usually *cold,* you would think I was laughing at you; yet there is nothing more true,—and I will give you an instance. A carpenter had his thumb severely bitten by a rattlesnake; and the effects of the venom are thus described by one of the most learned of living medical writers, Mr. Samuel Cooper:—"The consequence was, that in ten or eleven hours, the whole limb, axilla and shoulder became very *cold* and enormously swollen up to the neck; in fact, the surface of the whole body was *much below* the natural temperature. The swelling, you know, is produced by that kind of INFLAMMATION which is called diffuse *inflammation* of the cellular tissue."—(*Mr. S. Cooper's Lectures in* MED. GAZETTE.) Gentlemen, was there ever such an abuse of words—such an abandonment of common sense as this? The arm was "*very cold,*"—"much *below* the natural temperature," yet it was *inflamed*—on fire!

Restricted to the sense in which I have already spoken of the term—namely, heat, tumefaction, and pain,

"inflammation," like "fever," or any other abstract word, may be used as a "counter to reckon by;" and, like every other phenomenon of disease, it is a development of previous constitutional disturbance. I do not speak of immediate local inflammation produced by a chemical or mechanical injury—leaving that to the surgeons to elucidate or mystify, according to their particular inclinations: I talk of inflammation from a general or constitutional cause. Has an individual, for example, exposed himself to a cold draught, or to any other widely injurious influence, he shivers, fevers, and complains of pain, throbbing, and heat, in the head, chest, or abdomen—phenomena gradually developed according to the patient's predisposition to organic change in this or that locality. Phrenitis, Pneumonia, Peritonitis, (technical terms for inflammation of the *brain*, *lungs*, and *membranous covering* of the bowels), are consequences or features, not *causes*, of the constitutional disorder. But are the symptoms of inflammation in such such parts equally intermittent as the diseases of which we have already treated? Listen to Lallemand:—"In inflammation of the brain," he says, "you have spasmodic symptoms, slow and progressive paralysis, the course of the disorder being *intermittent*." So that inflammation, like every other morbid action, is a feature or development of intermittent fever. What says Dr. Conolly, in his Cyclopedia of Medicine? "Diurnal *remissions*," he tells us, "are distinguished in every attack of inflammation." Now, this evidence ought to be more than convincing, for it comes from the enemy's camp; it is the language of an opponent, the Editor of the British and Foreign Medical Review—the same who lately told his readers that the Unity of Disease was a silly book. If it was so silly, as he says, why was he so silly as to abuse it? But, against his authority,—if *authority*, in these days take the place of *examination*—you have the opinion of Sir Astley Cooper, who in the spirit of truth and candour, pronounced it to be a valuable work; and what man in his senses would think of comparing these

gentlemen together,—the able and accomplished Sir Astley Cooper, father of English surgery, and Dr. Conolly, the *mad*-doctor? "Hyperion to a satyr!"

But, to return to Inflammation. Consisting of an increase of motion and an increase of temperature, it is only a modification of every other morbid process. Whether it be termed erysipeloid, gouty, rheumatic, scrofulous, it is still *remittent;* and if you question the patient, he will in almost every case admit that it was preceded or accompanied by cold or hot fits, or both. May not inflammation, then, yield to bark—to quinine? The late Dr. Wallace, of Dublin, maintained the affirmative, dwelling more particularly on its good effects in that disorganizing inflammation of the eye, termed *Iritis,* in which disease, he preferred it to all the routine measures which *on the strength of a theory,* medical men have from time to time recommended as *antiphlogistic.* During an attack of intermittent fever, he tells us, *iritis* with inflammatory affection of other parts of the eye, occurred in the person of a patient under his care. "For the former complaint —namely, the intermittent fever—he administered bark; by the exhibition of which, he was *surprised at seeing the inflammatory affection of the eye,* as well as the fever, *disappear.*" This was the case which first led him to suspect the fallacy of the blood-letting system in inflammation of the eye. Now I shall tell you what first led me to entertain similar doubts of its efficacy. A medical officer of one of Her Majesty's regiments serving in India, couched a woman for cataract. The next day, the Eye having become inflamed, according to received practice he bled the patient; but scarcely had he bound up her arm, when she fell as if she had been shot, and lay to all appearance dead. With the greatest difficulty, he succeeded in recovering her from this state; but it was not till four long hours had passed, that he felt he could safely leave her with ordinary attendants; for during the greater part of that time, when he ceased to chafe her temples, or otherwise call up the attention of the brain by the application of stimulants to the nose, mouth, etc.,

she relapsed into a death-like swoon. More than once he was even obliged to inflate her lungs to keep her from dying. But, in this case, Gentlemen, the blood-letting did *not* cure the inflammation; for the next day the eye was more painful and inflamed than ever, and the poor woman, after all the blood she had lost—and nobody will in this case say that she was not bled enough—did not recover her sight. It is now eleven years since that case came under my observation, and it made an impression on my mind I shall never forget. Had that woman died, would not everybody have said that the gentleman who bled her had killed her? and very justly too, though he only conscientiously put in practice what he had been taught to consider his duty. You see, then, that blood-letting, *even to the point of death*, is *no cure* for inflammation; and that it can not *prevent* inflammation from being developed, I shall furnish you with ample evidence before we finish this lecture. Meantime, I will tell you what can do both—Bark and Opium. These are the remedies to give before an operation, and they are also the remedies best adapted for the relief of inflammation after it has come on;—and their beneficial influence will be more generally certain in the latter case, if you first premise an emetic, and wait till its action has ceased before you administer them.

"The Peruvian bark," says Heberden, "has been more objected to, than any of these medicines (Bitters) in cases of considerable inflammation, or where a free expectoration is of importance; for it is *supposed* to have, beyond any other stomach-medicine, such a strong bracing quality, as to *tighten the fibres* (!) still more which were already too much upon the stretch in inflammation, and its astringency has been judged to be the likely means of checking or putting a stop to expectoration. *All this appeared much more plausible when taught in the* SCHOOLS OF PHYSIC, than probable, when I attended to fact and experience. The unquestionable safety and *acknowledged use* of the bark, in the *worst stage* of inflammation, when it is tending to a MORTIFICATION, affords a sufficient

answer to the first of these objections; and I have several times seen it given plentifully in the confluent small-pox, without lessening in any degree the expectoration."

The following case occurred in my own practice. I was called to see a young gentleman, who had a swelling under the arm-pit, extending to the side. The skin was red and hot, and the tumor so painful as to have deprived him of all rest for the three previous nights. Though suppuration appeared to me to have commenced, I at once ordered quinine, and begged him to poultice the tumor. By these means, he was perfectly cured in three days, the swelling having, in that period, completely disappeared. The subject of this case was, in the first instance, attacked with shivering and fever, which had repeatedly recurred, but disappeared under the use of the quinine. Matter, I have no doubt, was absorbed in this instance, but so far from this absorption producing shiverings, which, according to the doctrine of the schools, it ought to have done, the very reverse took place.

What we have said of the bark in inflammation, will also apply to opium and arsenic; and however modern theories may oppose their employment in particular inflammations, experience will assuredly bear out the practical man in prescribing these agents, in all such cases, provided he give them in relation to the period of remission. Take the following instance of indubitable and palpable inflammation—if the word have a meaning at all—as a proof of the value of opium in its treatment.

Case.—An old officer, Major F. 89th foot, who had previously lost one eye by acute Ophthalmia notwithstanding a vigorous antiphlogistic discipline, had the other attacked in a similar manner with great pain, redness and throbbing. I found him leaning his head over a chair-back, his face indicative of intense agony. For ten nights, he assured me, he had been unable to tolerate any other position, and it was only towards morning, when overcome by suffering, that he could, at last, obtain anything like repose. The pain came on at bed-time in an aggravated degree, and remitted principally in the after-

noon. Three grains of opium, which I directed him to take half an hour before the recurrence of the expected paroxysm, procured him a whole night of profound sleep, and his eye, in the morning, to his astonishment, was free from pain and only slightly vascular. He had been repeatedly bled, leeched, and blistered, without even temporary benefit—indeed, the gentleman who attended him, in the first place, plumed himself upon the activity of his treatment.

Let us now speak of

PLEURISY AND PNEUMONIA.

"The periods of Pleurisy," says Darwin, "recur with *exacerbations* of the pain and *fever* about sunset." Pleurisy then is a remittent disorder. What is the difference betwixt Pleurisy and Pneumonia?—Any rapid tendency to *atomic* change in the substance of the lungs, from the real pain and presumed increase of temperature at the same time developed, is termed pneumonia—*vulgo* inflammation of the lungs. A similar tendency to change in the *atomic* relations of the *pleura*, (the *membrane* which lines the outer surface of the lungs,) or of that portion of it, which is continued over the inner surface of the chest, is called the pleurisy.—Adhesions of the lungs to the chest, are frequent results of this disease. Now, authors have thought it a fine thing to be able to tell pleurisy from pneumonia, but the thing is impossible, and what is more, if it were possible, so far as the treatment is concerned, it is not worth the time that would be spent in doing it. Such distinctions only lead to interminable disputes, without in the least tending to improvement in practice. All I know is, that both diseases are developments of intermittent fever, and both may often co-exist at one and the same time. And in the Medical Gazette there is an excellent case of this kind, which as it in a great measure illustrates our own doctrine and treatment in both, we shall give to you in the words of its narrator. "The patient's symptoms were difficult respiration, dry cough with stringy

expectoration, pulse full. The disease commenced with an intense *fit of shivering*, followed by *heat* and a severe cough. Every day at noon there was an *exacerbation* of all the symptoms, commencing with very great shivering, cough and *intolerable pain in the chest*, a fit of *suffocation* and finally, *perspiration*;—at the end of an hour the paroxysm terminated. Ammoniacal mixture was first given, then two grains of *Quinine* every two hours. The very next day the fit was scarcely perceptible, the day after there was no fit at all. An observation worthy of remark, is, that the symptoms of PLEURO-PNEUMONIA,—which continued throughout in a very slight degree, it is true, in the intervals of the paroxysms—disappeared completely, and in a very short time by the effect of the sulphate of quinine."

Now, what is the usual treatment of Pleurisy and Pneumonia? Does it not almost entirely consist in blood-letting, starvation and purgation—with blisters and mercury sometimes? But what are the results? Relapse or repetition of the paroxysm from time to time,—long illnesses,—weakness ever after, and death too often. Contrast the above case with the case and treatment of an individual, whose omnipotent power of setting a theatre in a roar, may be still fresh in the recollection of many of you—the celebrated Joe Grimaldi. The very name excites your smile! —but upon the occasion to which I refer, the poor clown, instead of being in a vein to move your laughter, very much wanted your sympathy. "Monday, the 9th of October," says Mr. Charles Dickens, "was the day fixed for his benefit, but on the preceding Saturday, he was suddenly seized with severe illness, originating in a most distressing impediment in his breathing. Medical assistance was immediately called in, and he was bled until nigh fainting, [in other words, to all but death]. This slightly relieved him, but shortly after, he had a relapse, [an exacerbation?] and four weeks passed before he recovered sufficiently to leave the house. There is no doubt, but that some radical change had occurred in his constitution, for previously he had never been visited

with a single day's illness, while after its occurrence, he never had a single day of perfect health." If you reflect that medical relief was *immediately* called in, you may be inclined, like myself, to ascribe poor Grimaldi's damaged constitution, not so much to the effect of the original disorder, as to the sanguinary treatment adopted in his case.

Gentlemen, in acute disease of the chest—whether involving the *pleura* simply, the parenchymatous substance of the lungs, or the *mucous* or *muscular* apparatus of their air tubes, your first duty is to premise an emetic. So far from acting exclusively on the stomach, medicines of this class have an influence primarily *cerebral*, and they therefore act powerfully upon every member and matter of the body. By emetics you may change the existing relations of the corporeal atoms more rapidly and effectually, than by any other agency of equal safety in the Materia Medica. Every kind of chest disease being a mere feature or development of fever, whatever will relieve the latter will equally relieve the former. The value of emetics in the simpler forms of fever, few will be sufficiently bold to deny; and the quickness with which the same medicines can alter the state of an inflamed part may be actually *seen* by their effects on the eye, in cases of ophthalmia. You have only to *try* them in chest-disease to be satisfied of their inestimable value in cases of this kind. Instead, therefore, of talking of the good you have occasionally seen done by the lancet in inflammations of the chest, call to mind the many deaths you have witnessed where it had been most freely used,—to say nothing of the long illnesses which have been the lot of such as have escaped the united bad effects of chest-disease and loss of blood. Whatever salutary influence, as a *present means of relief*, blood-letting may produce, it is infinitely inferior to what you may obtain by emetic remedies, which possess the additional advantage of giving that relief, without depriving the patient of the material of healthy constitutional power. Moreover, they have no slight influence as a *preventive* against return of the paroxysm—while

blood-letting, on the contrary, so far as my experience goes, has only appeared to render the patient more liable to a recurrence.

Gentlemen, Lord Bacon tells us in his Works, that if disciples only knew their own strength, they would soon find out their master's weakness. Now what led him to this conclusion? Was it not because he found he had himself been duped by his own teachers?—and why did Des Cartes say, that no man could possibly pretend to the name of philosopher who had not at least once in his life doubted all he had been previously taught? He too had been hoodwinked by his pretended masters in philosophy. But *you*, perhaps, will say all this took place in old times—the world is quite changed since then; professors are now the most respectable men alive; they go to church, where they are examples of piety; they never were *found out* in a lie; are not subject to the passions of other men; have no motives of interest or ambition—in fact, they are all but angels. Now I only wish you knew the manner in which most of these very respectable persons get their chairs—the intrigues, the tricks, the party work, the subserviency, meanness and hypocrisy practised by them for that and other ends—and you would not so tamely submit your judgment to their theoretic dreams and delusions. Young men, *be* MEN,—and instead of taking for gospel the incoherent and inconsistent doctrines of the fallible puppets whom chance or interest has stuck up in Academic Halls,—use your own eyes and exercise your own reason! Here then, I give you a test by which you may know the best practice in inflammatory diseases of the chest—a test that cannot deceive you. Take a certain number of pleuritic and pneumonic patients—bleed, blister and purge these after the most orthodox fashion, so that you shall not be able to tell, whether the continued disease is the effect of the primary cause, or the heroic measures by which your patients have been worried during their illness. Take another equal number similarly afflicted, and treat them chrono-thermally,—that is to say, premise an emetic, and when by means of this you have obtained a remission of the symp-

toms, endeavour to prolong such period of immunity, by quinine, opium or hydrocyanic-acid, and then compare the results of both practices. If you do not find an immense saving of suffering and mortality by the latter mode of treatment, I will consent to be stigmatized by you as an impostor and deceiver—a cheat—a quack—a person, in a word, who would rather teach error than vindicate truth. Remember, however, before you begin, that the Chrono-Thermal System professes, as its chief feature of superiority over every other, to make *short work* with disease,—a circumstance not likely to recommend it to those whose emolument, from the manner in which things are now ordered, arises principally from long sickness and much physic!

ENTERITIS.

I am often asked how I treat *Enteritis*,—inflammation of the bowels, without the lancet? Before I give my answer I generally ask—Can medical men boast of any particular success from depletion in this disease? If so, why have they been so solicitous to get the system under the influence of mercury,—or why do they prescribe turpentine in its treatment? Is it not because the nature of the relief afforded by the lancet has either been temporary or delusive, or what I have myself found it to be, absolutely hurtful in the majority of cases? "The symptoms of Enteritis," says Dr. Parr, "are a *shivering*, with an uneasiness in the bowels, soon increasing to a violent pain,—occasionally at first *remitting*, but soon becoming continual. Generally, the whole abdomen is affected at the same time with spasmodic pains, which extend to the loins, apparently owing to flatulency. The pulse is small, frequent, generally soft, but sometimes hard, and at last irregular and intermittent—the extremities are cold—the strength sinks rapidly." "Perhaps," he adds, "bleeding is *more seldom necessary* in this disease than in any other inflammation; for it rapidly tends to mortification, and should it not at once relieve, it soon proves fatal." In a letter

which I received last December from Mr. Hume, one of the medical officers of the 43rd Regiment, he says: "I am satisfied that Pneumonia and Enteritis, diseases which are at present the bugbears of the faculty, are indebted for their chief existence to the remedies employed in ordinary ailments, namely, bleeding and unnecessary purging. I never saw a case of either (and I have seen many) of which the subject had not been the inmate of an hospital previously, where he had undergone the usual *antiphlogistic* regimen,—or had been otherwise debilitated, as in the case of long residence in a warm climate." Now, Gentlemen, this is the language of an experienced Medical Officer of the Army, one who having no interested end to serve, and who would not take private practice if offered to him, is at least as worthy of belief as those whose daily bread depends upon the extent and *duration* of disease around them. My own practice in Enteritis I will illustrate by a case. I was one evening requested to see the butler of the Dowager Duchess of Roxburgh; I found him with severe pain of abdomen, which would not brook the touch, furred tongue, hard pulse and hot skin; he told me he had shivered repeatedly, that the pain was at first intermittent, but at last constant. He had been seen in the morning by a gentleman, who had ordered him turpentine and calomel—a proof that he also considered the case as one of Enteritis. The patient having obtained no relief, I was called in. I gave him an emetic, and went up stairs to await the result. In about twenty minutes, I again saw him. The vomit had acted powerfully, and with such relief that he could turn himself in bed with ease, which he could not before do. I then prescribed prussic acid and quinine—in a few days he was as well as ever. Let the practitioner, instead of bringing theoretic objections to this method of treating Enteritis, *put it to the proof*, and he will not, at all events, find himself less successful than by the ordinary mode of practice, which he must admit is, in the great majority of cases, followed by fatal results.

BLOOD-LETTING.

While with one class of practitioners Medicine is reduced to the mere art of purgation, with another class it consists in the systematic abstraction of blood;—every means being resorted to in the mode of doing this, from venesection, arteriotomy and cupping, to the basest application of the leech. In the remarks, Gentlemen, which I am now about to make upon the subject, instead of discussing the preferable mode of taking blood away, I shall bring before you some facts and arguments that may convince you of the perfect possibility of dispensing with the practice altogether.

"The imputation of novelty," says Locke, "is a terrible charge amongst those who judge of men's heads as they do of their perukes, by *the fashion*—and can allow none to be right but the received doctrine." Yet, in the words of the same acute writer:—"An error is not the better for being common, nor truth the worse for having lain neglected; and if it were put to the vote anywhere in the world, I doubt as *things are managed*, whether truth would have the majority; at least while the *authority of men*, and *not* the *examination of things*, must be its measure." In the same spirit Lord Byron asks:

"What from this barren being do we reap?
Our senses narrow, and our reason frail,
Life short, and TRUTH a gem that loves the deep,
And all things weighed in *Custom's* falsest scale.
Opinion an omnipotence—whose veil
Mantles the earth with *darkness*—until right
And wrong are accidents—and men grow pale
Lest their own judgments should become too bright,
And their free thoughts be crimes, and earth have too much light!"

The operation of Blood-letting is so connected and associated, in the minds of most men, with the practice of physic, that when a very sensible German physician some time ago petitioned the King of Prussia to make the employment of the lancet *penal*, he was laughed at from one end of Europe to the other. This you will not wonder at, if you

consider that the multitude always think "whatever *is* is right;" but a little reflexion will teach you that there must have been a period in the world's history, when the lancet was unknown as a remedy;—and that many centuries necessarily elapsed before it was even imagined that loss of blood could be required for the alleviation or cure of disease. Nations, nevertheless, grew and prospered. To what daring innovator the practice of physic owes the *curse* of the lancet, the annals of the art leave us in ignorance; but, this we know, that its introduction could only have been during the infancy of Medicine; when remedial means were yet few, and the action of remedies totally unknown. It was the invention of an unenlightened,—possibly, a sanguinary age; and its continued use says but little for the after-discoveries of ages, or for the boasted progress of medical science.

Of what is the body composed? Is it not of blood and blood only? What fills up the excavation of an ulcer or an abscess? What reproduces the bone of the leg or thigh, after it has been thrown off dead, in nearly all its length? What but the BLOOD under the electrical influence of the brain and nerves! How does the slaughtered animal die? Of loss of blood solely. Is not the blood then, in the impressive language of scripture, "the life of the flesh?" Further, is it not remarkable, that while the value of the blood in the animal economy is thus distinctly and emphatically acknowledged by divine authority, among the various modes of *cure* mentioned in the sacred volume, Blood-letting in any form is not once mooted!—we have "balms," "balsams," "baths," "charms," "physic," "poultices," even,—but blood-letting never!" Had it been practised by the Jews, would this have been omitted? Yet see with what heroic perseverance it is in these days prescribed and practised in every disorder, from infancy to age! Will the men who thus lavishly pour out the blood dispute its importance in the animal economy? —will they deny that it forms the basis of the solids?—that when the body has been wasted by long disease, it is by the blood only it can recover its healthy volume and

appearance? Has not nature done every thing to preserve to animals of every kind,

"The *electric blood* with which their arteries run!"*

She has provided it with strong resilient vessels—vessels which slip from the touch, and never permit their contents to escape, except where their coats have been injured by accident or disease. Misguided by theory, man, presumptuous man, has dared to divide what God as a part of creation united — to open what the Eternal in the wisdom of his omniscience made entire! Enter the crowded hospitals of England—of Europe!—and behold there how mercilessly the lancet, the leech and the cupping-glass are employed in the diseases of the poor. Look at the pale and ghastly faces of the inmates of these hospitals,—listen to their groans and sighs,—observe the nurses and attendants with the ready blister and other instruments of torture which solemn Pedantry prescribes as the infallible means of relieving suffering.—Having done this, refrain if you can from exclaiming with Bulwer, "when Poverty is sick, the doctors mangle it!"† What are the causes of the disorders of this class of people? In the majority of cases, defective food and impure air. By these has their blood been deteriorated — and for what does the (so termed) man of science abstract it? To make room for better? No!—goaded on by the twin-goblins, "congestion" and "inflammation" to deteriorate it still further by starvation and confinement. These terms play in physic what others, equally senselessly misused, play in real life.

"Religion, freedom, vengeance, what you will,
A word's enough to raise mankind to *kill*,
Some *party* phrase by *cunning* caught and spread,
That GUILT may reign, and WOLVES and worms be fed!"

The first resource of the surgeon is the lancet—the first thing he thinks of when called to an accident is how he can quickest open the floodgates of the heart, to pour out

* Byron, in Prophecy of Dante.

† "He that sinneth against his Maker, let him fall into the hands of the physicians!"—*Ecclesiasticus*, chap 38, v. 15.

the stream of an *already enfeebled* existence. Does a man fall from his horse or a height, is he not instantly bled ?—has he been stunned by a blow, is not the lancet in requisition ?—Nay, has an individual fainted from over exertion or exhaustion, is it not a case of FIT—and what so proper as venesection ?

You cannot have forgotten the fate of Malibran—the amiable and inimitable Malibran—she who so often, by her varied and admirable performanees, moved you to tears and smiles by turns. She was playing her part upon the stage—she entered into it with her whole soul, rivetting the audience to the spot by the very intensity of her acting. Just as she had taxed the powers of her too delicate frame to the uttermost—at the very moment she was about to be rewarded by a simultaneous burst of acclamation, she fainted and fell—fell from very weakness. Instantly a medical man leapt upon the stage—to administer a cordial ?—No—to bleed her !—to bleed a weak, worn and exhausted woman ! And the result ? — She never rallied from that unfortunate hour.—But, Gentlemen, Malibran was not the only intellectual person of the thousands and tens of thousands who have prematurely perished by the lancet.—Byron and Scott—the master-spirits of the age—men who like Ariosto and Shakspeare not only excited the admiration of cotemporary millions, but whose genius must continue for generations yet unborn, to delight the land that produced them—they too fell victims to the lancet—they too were destroyed by hands which, however friendly and well-intentioned, most undoubtedly dealt them their death-blows. Is not this a subject for deep reflexion ? To the cases of these great men we shall recur in the course of this lecture; but for the present, we must turn to other matters—to events that have just passed before our eyes. The affair of Newport, in Wales, is still the topic of the hour. You must therefore remember it to its minutest detail—the attack by the rioters upon the town—the gallant and successful stand made by Captain Gray and his little detachment of the 45th regiment—the prisoners captured, and the investigation which afterwards took place.

Gentlemen, you cannot have forgotten that one of the prisoners in the course of his examination *fainted.*—You know what was done with him?—he was carried out of court and immediately *bled!* On his return, the newspapers tell us, an extraordinary change had come over his countenance. From being a man of robust appearance, he had become so wan and haggard, so altered in every lineament, the spectators could scarcely recognize him as the same prisoner. Yet, strange to say, not one of the many journals that reported this case, introduced a single word in condemnation of the utterly uncalled for measure which brought the man to such a state;—so much has *custom* blunted the sense of the public to this the most dangerous of all medical appliances!

Gentlemen, a coroner's inquest was held upon a person who died suddenly. I shall read to you what followed from the Times newspaper of the 20th December, 1839, suppressing, for obvious reasons the name of the witness. "Mr. ——— surgeon, stated that he was called upon to attend deceased, and found him *at the point of death.* He attempted to BLEED him, but ineffectually, and in less than a minute from witness' arrival, deceased expired. Witness *not being able* to give *any opinion* as to the cause of death from the *symptoms that then* exhibited themselves, he afterwards, with the assistance of Dr. Ridge, 37, Cavendish Square, made a *post-mortem* examination, and found that a large cavity attached to the large vessel of the heart (aneurism of the aorta) containing blood had burst, and that that was the cause of death." So that while the man was actually dying of *inanition* from internal bleeding, the surgeon, utterly ignorant, according to his own confession, of the nature of the symptoms, deliberately proceeded to open a vein!—How happens it that the lancet is so invariably the first resort of IGNORANCE!

In every case of *stun* or *faint,* the employment of this instrument must be a superadded injury;—in all, there is a positive enfeeblement of the whole frame, evidenced by the cold surface and weak or imperceptible pulse;—there is an exhaustion which loss of blood, so far from relieving,

too often converts into a state of utter and hopeless prostration. True, men recover though treated in this manner, but these are not *cures*—they are *escapes!*

Gentlemen, there are few diseases which loss of blood may not of itself produce. If it cannot cause the eruptions of small-pox, nor the glandular swellings of plague, it has given rise to disorders more frequently and more immediately fatal than either. What think you of cholera asphyxia? Gentlemen, the symptoms of that disease are the identical symptoms of a person bleeding away from life! The vomiting, the cramps, the sighing, the long gasp for breath—the leaden and livid countenance which the painter gives to the dying in his battle-pieces—these are equally the symptoms of cholera and loss of blood! Do not think I confine myself to extreme cases,—for God only knows I have seen such instances too often in the course of my professional experience to doubt of their daily frequency. Among the numerous diseases which it can produce, Darwin says—"a paroxysm of *gout* is liable to recur on bleeding,"—John Hunter mentions "lock-jaw and dropsy" among its injurious effects,—Travers, "blindness,"—Marshall Hall, "mania,"—Blundell, "dysentery,"—Broussais, "FEVER and convulsions!" "When an animal loses a considerable quantity of blood," says John Hunter, "the heart increases in its frequency of strokes, as also in its *violence*." Yet these are the indications for which professors tell you to bleed! You must bleed in every inflammation they tell you. Yet is not inflammation a *daily effect* of loss of blood! Magendie mentions "*pneumonia*" as having been produced by it,—completely confirming the evidence of Mr. Hume upon that point. He further tells us that he has witnessed among its effects "the entire train of what people are pleased to call *inflammatory* phenomena;—and mark," he says, "the extraordinary fact, that this inflammation will have been produced by the very agent which is daily used to combat it!" What a long dream of fancied, but false security have mankind been dreaming!—they have laid themselves down on the laps of their medical mentors,

while these, like the fabled vampire of the poets, taking advantage of a dark night of barbarism and ignorance, have thought it no sin to rob them of their life's blood during the profoundness of their slumber!

Gentlemen, the long shiver of the severest ague, the burning fever, the *fatal* lock-jaw, the vomiting, cramps, and asphyxia of cholera, the spasm of asthma and epilepsy, the pains of rheumatism, the palpitating and tumultuous heart, the most settled melancholy and madness, every species of palsy, the *faint* that became *death*, these—all these—have *I* traced to loss of blood. Could arsenic, could prussic acid, in their deadliest and most concentrated doses, do more? Yet I have heard men object to use the minutest portions of these agents, medicinally,—men who would open a vein, and let the life-blood flow until the patient fell like an ox for the slaughter, death-like and all but dead, upon the floor! Do these practitioners know the nature of the terrible power they thus fearlessly call to their aid? Can they explain its manner of action, even in those cases where they have supposed it to be beneficial? The only information I have been able to extract from them upon this point, has been utterly vague and valueless. Their reasoning, if it could be called reasoning, has been based on a dread of "inflammation" or "congestion." From the manner in which they discuss the subject, you might believe there was no remedy for either, but the lancet. Ask them why they bleed in ague—in syncope, in exhaustion or collapse?—they tell you it is to relieve congestion. After a stun or fall?—it is to prevent inflammation. Bleeding, in all my experience, I have already stated to you, never either relieved the one, or prevented the other! Gentlemen, did you never see inflammation of a vein *after* bleeding—inflammation caused by the very act? I have known such inflammation end *fatally*. Did you never know the wounds made by leech-bites become inflamed, after these reptiles had exhausted the blood of the part to which they were applied? And how came that about? Simply because, however perfectly you

exhaust any part of its blood, you do not thereby prevent that part from being again filled with it—or rather, you make it more liable to be so, by *weakening the coats of the containing vessels!* Gentlemen, hundreds, thousands have recovered from every kind of disease, who never were bled in any manner—and many, too many, have died, for whom the operation, in all its modes, had been most scientifically practised! Have I not proved that every remedial agent possesses but one kind of influence —namely, the power of changing temperature? Let the schoolman shew me that the lancet possesses any superiority in this respect—any specific influence more advantageous than other less questionable measures; and I shall be the last to repudiate its aid in the practice of my profession. The beneficial influence of Bloodletting, where it has been beneficial in disease, relates solely to *temperature.* To this complexion it comes at last, and to nothing more—the equalization and moderation of temperature. In the congestive and non-congestive stages of fever—the cold—the hot—the sweating—the lancet has had its advocates. Bloodletting, under each of these circumstances, has changed existing temperature. Why, then, object to its use? For this best of reasons, that we have remedies without number, possessing each an influence equally rapid and an agency equally curative, without being like bloodletting, attended with the insuperable disadvantage of abstracting the material of healthy organization. I deny not its power as a remedy, in certain cases; but I question its claim to precedence, even in these. Out of upwards of TWELVE THOUSAND CASES of disease that have, within the last five years, been under my treatment, I have not been compelled to use it once. Resorted to, under the most favourable circumstances, its success is anything but sure, and its failure involves consequences which the untoward administration of other means may not so certainly produce. Have we not seen that all diseases have remissions, and exacerbations—that mania, asthma, apoplexy and inflammation, are all remittent disorders? From the agony or intensity of each of these developments of fever, you may obtain a

temporary relief by the use of the lancet; but what has it availed in averting the recurrence of the paroxysm? How often do you find the patient you have bled in the morning, ere night, with every symptom in aggravation. Again you resort to bleeding, but the relief is as transitory as before. True, you may repeat the operation, and re-repeat it, until you bleed both the blood and the life away. Venesection, then, in the majority of cases, is a temporary but delusive relief. The general result is depression of vital energy, with diminution of corporeal force!

Dr. Southwood Smith, physician to the London Fever Hospital, has published a book purposely to show the advantages of bleeding in fever. One of his cases is so curiously ILLUSTRATIVE of his position, that I shall take the liberty of transcribing it from the *Medical Gazette*, with a running commentary by the Editor of that periodical. "The case of Dr. Dill demands our most serious attention, and deserves that of our readers. It is adduced as an example of severe cerebral affection, in which cases, Dr. S. affirms, 'the bleeding must be large and early as it is copious.' 'I saw him,' says Dr. Smith, '*before* there was any pain in the head, or even in the back, while *he was yet only feeble and chilly*. The aspect of his countenance, the state of his pulse, which was slow and labouring, and the answer he returned to two or three questions, satisfied me of the inordinate, I may say the ferocious attack that was at hand.—p. 398.

"Whatever may be the opinion of our readers, as to the above signs indicating a ferocious cerebral attack, they will one and all agree with us, that the ferocious attack was met with a ferocious treatment; for an emetic was given without delay, and 'blood was taken from the arm, to the extent of *twenty ounces*.' This blood was *not* inflamed. Severe pains in the limbs and loins, and intense pain in the head came on during the night—and early in the morning *blood was again drawn* to the extent of *sixteen ounces*, 'with great diminution, but not entire removal of the pain.' Towards the afternoon, he was *again bled* to sixteen ounces. 'The pain was now quite

gone—the blood from both these bleedings intensely *inflamed.'**

"During the night the pain returned, and in the morning, notwithstanding the eyes were dull, and beginning to be suffused, the face blanched, (no wonder!) and the pulse slow, and intermittent and weak; *twelve leeches* were applied to the temples—and as these did not entirely remove the pain, more blood, to the extent of *sixteen* ounces, was taken by cupping. The operation afforded great relief—but the following morning, the pain *returned*, and again was blood abstracted to *sixteen* ounces. 'Immediate relief followed this second operation; but, *unfortunately*, the pain returned with great violence, towards evening; and it was now impossible to carry the bleeding any further.' Typhoid symptoms now began to shew themselves; 'the fur on the tongue was becoming brown, and there was already slight tremor in the hands.' What was to be done? Ice, and evaporating lotions were of no avail;—but, happily for Dr. Dill, the affusion of cold water on the head, 'the cold dash,' was thought of and employed—and this being effectually applied, the relief was 'instantaneous and most complete.' So that this case, announced as a severe cerebral affection, and treated, in anticipation, by copious bloodletting, *before there was any pain in the head, while the patient was yet only feeble and chilly*, which grew worse and worse as the bloodletting was repeated, until after the abstraction of *ninety ounces* of blood, the patient had become in a 'state of intense suffering,' and 'imminent danger,' and was relieved at last by the cold dash—this case we say is brought forward as a specimen of the extent to which copious bloodletting may sometimes be REQUIRED!! Most sincerely do we congratulate Dr. Dill on his escape, not from a dangerous disease, but from a DANGEROUS REMEDY."—*Medical Gazette.*

Could any case more forcibly exemplify the utter inefficiency of bloodletting, in all its forms, either as a

* *Inflamed*, according to Dr. Smith's notions— but mark, in his own words—the first blood drawn was *not* inflamed. Were the lancet a preventive of inflammation, how came the blood to be inflamed after so many bleedings?

certain remedy, or a preventive of fever? Yet such is the force of custom, prejudice, education, that this case,—and, I have no doubt, thousands like it, so far from opening the eyes of the physician to the London Fever Hospital, only served to confirm him in his error. He had his *methodus medendi*, and he pursued it; and notwithstanding the total inefficacy of his vaunted remedy, he gives the case at length, as a perfect specimen of the most perfect practice—mark the result of that practice! But for the "cold dash," the patient must have perished. It is even now a question whether he ever recovered, from those repeated bloodlettings,—for he died not many months after. Happy would it have been for mankind, that we had never heard of a "Pathological School,"—happier for Dr. Dill, for to that school, and its pervading error of imputing effect for cause, may we fairly attribute all this sanguinary practice.

Let us now take the case of the late Lord Byron, who certainly fell a victim to what he himself called "the *destructive* art of healing." It is thus detailed by Mr. Moore;—"Of all his prejudices, he declared the strongest was that against bleeding. His mother had obtained from him a promise, never to consent to being bled, and, whatever argument might be produced, his aversion, he said, was stronger than reason. 'Besides, is it not,' he asked, 'asserted by Dr. Reid, in his Essays, that less slaughter is effected by the lance, *than the lancet*—that minute instrument of mighty mischief!' On Mr. Millingen observing that this remark related to the treatment of nervous, but not of inflammatory complaints, he rejoined, in an angry tone, 'Who is nervous, if I am not?—and do not those other words of his apply to my case, where he says, that drawing blood from a nervous patient, is like loosening the cords of a musical instrument, whose tones already fail, for want of sufficient tension! Even before this illness, you yourself know how weak and irritable I had become; and bleeding, by increasing this state, will inevitably kill me. Do with me what else you like, but bleed me, you shall *not*. I have had several inflammatory fevers in my life, and at an age when more robust and plethoric; *yet I got through*

them without bleeding. This time, also, will I take my chance.' " After much reasoning, and repeated entreaties, Mr. Millingen at length succeeded in obtaining from him a promise, that should he feel his fever increase at night, he would allow Dr. Bruno to bleed him. "On revisiting the patient early next morning, Mr. Millingen learned from him, that having passed, as he thought, on the whole, a better night, he had not considered it necessary to ask Dr. Bruno to bleed him. What followed, I shall, in justice to Mr. Millingen, give in his own words: —'I thought it my duty now to put aside all consideration of his feelings, and to declare solemnly to him how deeply I lamented to see him trifle thus with his life, and show so little resolution. His pertinacious refusal had already, I said, caused much precious time to be lost;—but few hours of hope now remained, and, unless he submitted immediately to be bled, we could not answer for the consequences. It was true, he cared not for life, but who could assure him, that unless he changed his resolution, the uncontrolled disease might not operate such disorganization in his system, as utterly and for ever to deprive him of reason! I had now hit at last on the sensible chord; and, partly annoyed by our importunities, partly persuaded, he cast at us both the fiercest glance of vexation, and throwing out his arm, said, in the angriest tone, 'There you are, I see, a d—d set of butchers,—take away as much blood as you like, but have done with it!' We seized the moment, (adds Mr. Millingen,) and drew about twenty ounces. On coagulating, the blood presented a strong buffy coat; yet the relief obtained did *not* correspond to the hopes we had formed; and during the night, the fever became *stronger than it had been hitherto,* the restlessness and agitation increased, and the patient spoke several times in an incoherent manner.' " Surely, this was sufficient to convince the most school-bound of the worse than inoperative nature of the measure. Far from it. " On the following morning, the 17th, the bleeding was repeated *twice,* and it was thought right also to apply blisters on the soles of his feet!" Well might Mr Moore exclaim: " It is pain

ful to dwell on such details." For our present purpose, it will be sufficient to state, that although "the rheumatic symptoms had been completely removed," it was at the expense of the patient's life; his death took place upon the 19th (April,) that is, *three* days after he was *first* bled.—*Moore's Life of Byron.* Now I ask you, what might have been the termination of this case, had an emetic been substituted for the lancet, and had the remission been prolonged by quinine or arsenic? Not only is it possible, but probable, that a successful result might have ensued, without any treatment at all. Lord Byron, when describing the effects of a former fever, says: "After a week of half delirium, burning skin, thirst, hot headache, horrible pulsation, and no sleep, by the blessings of barley water, and *refusing to see my physician,* I recovered." Facts *like these,* are indeed stubborn things!

I have preferred to give these two instances of what I conceive to be decided malpractice, to any of the numerous cases which have come under my own observation, as the first named gentleman was well known to many of the medical profession, while the death-scene of the noble poet will arrest the attention of all who take an interest in his genius. In the generality of cases, it matters little what may have been the primary cause of disorder. The effect, under every circumstance, refers to temperature, and to the greater or less interruption of the two chief vital processes *Digestion* and *Respiration.* In other words, there is a stop to SANGUIFICATION, or the necessary reproduction of that fluid, which, throughout all the changes of life, is constantly maintaining expenditure.

This then being the first effect of disorder, let us beware how we employ a remedy, which, if it succeed not in restoring healthy temperature, must inevitably hasten the fatal catastrophe—or, in default of that, produce those low chronic fevers, which, under the names of dyspepsia, hypochondria, hysteria, &c., the best devised means too often fail to alleviate, far less to cure.* With the free admis-

* "Numbers of persons labouring under *nervous debilities,* attribute the first appearance of their malady to large bleedings, or evacuations

sion that the lancet is capable of giving *temporary* relief to local fulness of blood, and to some of the attendant symptoms, I reject it generally, upon this simple and rational ground, that it cannot prevent such fulness from returning—while it requires no ghost from the grave to tell us its influence upon the general constitution, must, in every such case be prejudicial. I care not whether you take inflammation of any considerable internal organ,—the brain, liver, or heart,—or of any external part, the knee or ancle joint, for example—with the lancet, you can seldom ever do more than give a delusive relief, at the expense of the powers of the constitution. The man of routine, who has not heard my previous lectures, giving up fever, perhaps, and a few other disorders, which the occasional obstinacy of a refractory patient, contrary to "received doctrine," has taught him may yield to other means than blood-letting—will ask me, what I should do without the lancet in apoplexy? Here the patient having no will of his own, and the prejudices of his friends being all in favour of blood-letting, the school-bound member of the profession has seldom an opportunity of opening his eyes. Mine were opened by observing *the want of success* attending the sanguinary treatment; in other words, the number of deaths that took place, either in consequence, or in spite of it! Was not that a reason for change of practice? Having in my Military Hospital no prejudices to combat; and observing the flushed and hot state of the patient's forehead and face, I determined to try the cold affusion. The result was beyond my best expectations. The first patient was laid out all his length, and cold water poured on his head, from a height. After a few ablutions, he staggered to his feet, stared wildly round him, and then walked to the hospital, where a smart purgative completed his cure. While in the army, I had a sufficiently extensive field for my experiments; and I seldom afterwards lost an apoplectic patient.

But, Gentlemen, since I embarked in private practice,

of blood from other causes. No fact is better known to the medical observer, than that frequent convulsions are a common consequence of the large loss of blood."—*Dr. Trotter, Physician to the Royal Navy*

I have improved upon my army plan. With the purgative given after the cold ablution, I have generally combined quinine or arsenic—and I have also, upon some occasions, at once prescribed hydrocyanic-acid without any purgative at all. I have not lost a patient out of many so treated. That *quinine* may prevent the apoplectic fit, I have proved to you, by the case given by Dr. Graves. The value of *arsenic* in apoplexy has also been acknowledged, even by members of the profession—but whether they have been acquainted with the true principle of its mode of action, in such cases, is another thing. Dr. A. T. Thomson, recommends it "in threatened apoplexy, after *cuppings and purgings*, when the *strength is diminished* and the complexion pale"—that is, you must first break down the whole frame by depletion—you must, still further, weaken the already weak vessels of the brain before you take measures to give their coats the degree of strength and stability, necessary to their healthy *containing power!* Upon what principle would *you*, Gentlemen, prescribe arsenic in threatened apoplexy? Surely, upon the same principle that you would prescribe it during the remission in ague—to prolong the period of immunity—to avert the paroxysm. Long after the bark came into fashion for the cure of ague, practitioners still continued to treat that distemper, in the first instance, by depletion, till the complexion became pale. Do they treat it so now?—No—they have become wiser!—why then do they go on from day to day, bleeding in threatened apoplexy? In the case given by Dr. Graves, depletion, repeated depletion did not prevent the recurrence of the apoplectic fit—but quinine was at once successful.—Sir Walter Scott had a series of fits of apoplexy. What did the bleeding and starving system avail him? It gave him, perhaps, a temporary relief, to leave him at last, in a state of irrecoverable prostration. Mr. Lockhart, his biographer, tells us how weak the bleeding always made him. But how could it be otherwise seeing that I have proved to all but mathematical demonstration, that whatever debilitates the whole body, must still further confirm the original weakly condition of the coats of the blood-vessels, which constitutes the tendency to apoplexy.

Had the cold dash been resorted to during the fit, and had quinine, arsenic or hydrocyanic-acid been given during the period of immunity, the Author of Waverley might still be delighting the world with the wonderful productions of his pen.

Shall I be told there are cases of apoplexy, where the face is pale, and the temperature cold? My answer is—these cases are not apoplexy, but *faint*;—cases which the cold dash, or a cordial might recover, but which the lancet in too many instances has perpetuated to fatality! If the practitioner tells me that the cold dash can not cure an apoplexy, where a vessel is ruptured with *sanguineous effusion*, my reply is, that in such a case he may bleed all the blood from the body, with the same unsuccessful result! In the case of effusion of blood in an *external* part, from a bruise for instance, could any repetition of venesection make the effused blood re-enter the vessel from which it had escaped? No more could it do so in the brain, or any other part. When on the contrary, there is no ruptured vessel, the cold dash will not only contract the vessels more effectually than blood-letting, but it will moreover rouse the patient from his stupor, by the simple shock of its application. Surely, if the mere application of a cold key to the back very often stops bleeding from the nose, you can be at no loss to conceive how the greater shock of the cold dash may stop a bleeding in the brain!—But from theory and hypothesis, I appeal to indubitable and demonstrative fact.

Let the older members of the profession seriously reflect upon the ultimate injury which may accrue to their own interests, by opposing their school-follies and prejudices to palpable and demonstrative truth. So long as colleges and schools could mystify Disease and its nature, any treatment that these proposed—no matter how cruel or atrocious—would be submitted to in silence; but, when men find out that every kind of disorder, inflammation included, may be conquered, not only by external, but by *internal* means, they will pause before they allow themselves to be depleted to death, or all but death, by the lancets of either surgeon or physician. The world will not now be

deluded by the opposition of men, who stick to their opinion not so much because they have long supported it, as that it supports them—men, who in the words of Lord Bacon, would dispute with you whether *two* and *two* made four, if they found the admission to interfere with their interests.

Will any practitioner be so bold as to tell me that inflammation of any organ in the body is beyond the control of internal remedies? For what, then, I ask, do we prescribe mercury for inflammation of the liver and bowels? Why do we give colchicum for the inflamed joints termed gout and rheumatism? Do not these remedies, in numerous instances, lessen the temperature, pain and morbid volume of these inflammations, as surely as the application of leech or lancet? If, for such inflammations we have internal remedies, why may we not have medicines equally available for diseases of the lungs? Have I not shewn you the value of prussic acid in such cases? But I shall be told of the danger of such a remedy in any but skilful hands. In the hands of the ignorant and injudicious, what remedial means, let me ask, have not proved, not only dangerous but deadly?—Has not mercury done so?—Are purgatives guiltless? How many have fallen victims to the lancet! With prussic acid properly diluted and combined, I have saved the infant at the breast from the threatened suffocation of croup. I have known it in the briefest space of time relieve, so called, inflammation of the lungs, where the previous pain and difficulty of breathing were hourly expected to terminate in death.*

* I have prescribed this medicine upwards of thirty thousand times, and I never once had occasion to regret that I had done so. I mention this, because I am daily abused for employing it. It was only the other day a *Fellow of the College of Physicians* told a patient of mine that the dose I had ordered for him (less than two drops!) would kill him. Perhaps that simple Fellow will move a resolution to have the remedy banished from the Pharmacopæia of his College, where it stands in all the prominent blackness of *printers' ink* as a medicine of established value! How wretchedly ill off for bread must the Fellows of the College of Physicians be, when they descend to such degrading practices!

True, like every other remedy, it may fail—but have we no other means or combination of means for such cases? With emetics and quinine I have seldom been at a loss; and with mercury and turpentine I have cured pneumonia.

But will the inflamed heart yield to anything but blood-letting? Fearlessly I answer yes! and with much more certainty. With emetics, prussic acid, mercury, colchicum, silver, &c., I have conquered, cases that were theoretically called inflammations of the heart, and which the abstraction of half the blood in the body could not have cured. So also has Dr. Fosbroke, physician to the Ross Dispensary, a gentleman, who had the felicity to be associated with Dr. Jenner in his labours, and one, in whose success and fortunes that illustrious man took the warmest interest.* In some of the numbers of the Lancet, Dr. Fosbroke has given several cases of Heart-Disease, which he treated successfully without blood-letting, and with a rare candour, he admits that a lecture of mine on the heart and circulation had no small influence in leading him to dismiss blood-letting in the treatment of them. At the conclusion of this lecture, I will read you some extracts from a long letter, which I hope he will publish at length, written to me, this year, on the subject of blood-letting.

The human mind does not easily turn from errors with which, by early education, it has been long imbued: and men, grey with years and practice, seldom question a custom that, fortunately for them, at least, has fallen in with the prejudices of their times. For myself, it was only step by step, and that slowly, that I came to abandon the lancet altogether in the treatment of disease. My principal substitutes have been the various remedies, which from time to time I have had occasion to mention; but in a future lecture I will again enter more fully into their manner of action. That none of them are without danger in the hands of the unskilful, I admit;—nay, that some of them, mercury

* See Baron's Life of Jenner.

and purgatives, for example, have, from their abuse, sent many more to the grave than they ever saved from it, is allowed by every candid and sensible practitioner. But that was not the fault of the medicines, but of the men, who having prescribed them, without properly understanding the principles of their action, in the language of Dr. Johnson, "put bodies, of which they knew little, into bodies of which they knew less!"

Gentlemen, I have not always had this horror of blood-letting. In many instances have I formerly used the lancet, where a cure, in my present state of knowledge, could have been effected without; but this was in my noviciate, influenced by others; and without sufficient or correct data to think for myself. In the Army Hospitals, I had an opportunity of studying disease, both at home and abroad. There I saw the fine tall soldier, on his first admission, bled to relief of a symptom, or to fainting. And what *is fainting?* A loss of every organic perception—a death-like state, which only differs from *death*, by the possibility of a recall. Prolong it to permanency and it *is* death! Primary symptoms were, of course, got over by such measures—but once having entered the hospital walls, you found that soldier's face become familiar to you. Seldom did his pale countenance recover its former healthy character. He became the victim of consumption, dysentery or dropsy; his constitution was broken by the first depletory measures to which he had been subjected.

Such instances, too numerous to escape my observation, naturally led me to ask:—Can this be the proper practice? It was assuredly the practice of others—of all. Could all be wrong? Reflection taught me that men seldom act for themselves; but take, for the most part, a tone or bias from some individual master.

> By education, most have been misled,
> So they believe, because they were so bred.

But, Gentlemen, I had the resolution to think for myself—aye—and to act, and my conviction, gained from

much and extensive experience is, that ALL diseases may, not only be successfully treated without loss of blood; but that blood-letting, however put in practice, even where it gives a temporary relief, almost invariably injures the general health of the patient. Englishmen! you have traversed seas, and dared the most dangerous climes to put down the traffic in blood;—are you sure that in your own homes there is no such traffic carried on — no GUINEA TRADE?

ABSTINENCE.

Connected with Blood-letting in the treatment of inflammation, we generally find Starvation or Abstinence recommended. Beware of carrying this too far!—for

"Abstinence engenders maladies."

So Shakspeare said, and so nature will tell you in the teeth of all the doctors in Europe! Abstinence, Gentlemen, may produce almost every form of disease, which has entered into the consideration of the physician; another proof of the unity of morbid action, whatever be its cause. The prisoners of the Penitentiary "were suddenly put upon a diet, from which animal food was almost entirely excluded. An ox's head, which weighed eight pounds, was made into soup for one hundred people; which allows one ounce and a quarter of meat to each person. After they had been living on this food for some time, they lost their colour, flesh and strength, and could not do as much work as formerly. At length, this simple debility of constitution was succeeded by various forms of disease. They had scurvy, dysentery, diarrhœa, *low fever*, and lastly, diseases of the brain, and nervous system."

"The affections which came on during this faded, wasted, weakened state of body, were headache, vertigo, delirium, convulsions, APOPLEXY, and even mania. When bloodletting was tried, (why was it tried?) the patients fainted, after losing five, four, or even fewer ounces of

blood. On examination, after death, there was found *increased vascularity* of the brain, and sometimes fluid between its membrane and its ventricles."* Is not this a proof of what I stated to you in my last lecture, that the tendency to the hæmorrhagic diathesis does not so much depend upon fulness of blood, as upon *weakness of the coats of the containing vessels?* Starvation, you see, actually producing this disease—in the *brain* at least.

Sir Walter Scott, in his autobiography, has given us the effects of abstinence, or, what he describes as a "severe vegetable diet" upon himself. "I was affected," he says, "while under its influence, with a *nervousness*, which I never felt before nor since; a disposition to start upon slight alarms; a want of decision in feeling and acting, which has not usually been my failing,—an acute sensibility to trifling inconveniences, and an unnecessary apprehension of contingent misfortunes rise to my memory, as connected with vegetable diet."—*Lockhart's Life of Scott.*

Is not this a lesson to some of our modern doctors, who are so fond of recommending starvation to their patients? How can a system of treatment which so shakes the entire body, by any possibility improve the weak point, wherever that happens to be?—Must it not, in the very nature of things, make the man predisposed to consumption more certainly consumptive?—and so on throughout the whole catalogue of hereditary disease. That abstinence is proper in the commencement of acute disorder nobody will doubt. The fact is proved by the inability of the patient to take his accustomed meal: his stomach then is as little fit to digest nutriment, as his limbs are inadequate to locomotion; both require to rest.—But to starve a patient who is able and willing to eat, is downright madness.

In chronic disease, the patient should take food only in small quantities at a time, in the same way as the limbs should be gently but equally exercised. Need I

* *Dr. Latham,* and *Cyclopædia of Medicine.* Article ABSTINENCE.

say that, in this country, abstinence is generally carried too far by medical men. I must again repeat, *Est modus in rebus.*

Gentlemen, I shall now read you a few of many communications I have received from medical men of repute, since I first published my doctrines in 1836. Dr. Fosbroke, of Ross, began his medical career as the associate of the immortal Jenner, whose great doctrine of Vaccination he materially assisted to propagate. You will therefore fully appreciate the evidence of a gentleman so distinguished in the history of medicine—one to whose high sense of honour, independence of principle, and phisophical and enquiring spirit, even his rivals in practice have borne their united testimony. From a letter which I received from him in January of this year, I shall read to you the following passages:—

"In April, 1835, our acquaintance and free communication commenced; and though I pricked up my ears like one thunderstruck, at your wholesale denunciation of blood-letting, and your repeated asseverations that in a practice embracing the treatment of several thousands of patients per annum, you never employed a lancet or a leech;—your assertions *made an impression,* though it was slowly and reluctantly received." That it strengthened by time, Gentlemen, you will see by the next extract. "Nothing can be more striking than the great disparity between the proportion of persons who were bled in the two first years of my Ross practice, 1834 and 1835, (in which latter year he first became acquainted with my views,) and the three following years 1836, 1837 and 1838. In the former two years, I bled one in *seven,* in the fourth one only in *twenty-eight*—and in the fifth year I bled NONE! The year 1839 is now concluded, and again in all that time I have NOT bled a single individual!"

"Your crime is that you are before the age in which you live. If you had done nothing else but put a bridle upon Blood-letting, you would deserve the eternal gratitude of your race, instead of the calumny and oppression of the two-legged fools — the Yahoos, who persecute their

greatest benefactors. But how can *you* expect to be more fortunate than your predecessors in this respect? The health of Sir Humphrey Davy was affected by the ingratitude of his country. 'A mind,' said he, 'of much sensibility might be disgusted, and one might be induced to say:—" Why should I labour for public objects only to meet abuse? I am irritated more than I ought to be, but I am getting wiser every day,—recollecting Galileo and the times when philosophers and public benefactors were burnt for their services.' Whence is all this? Pride, poverty, disappointment, difficulty and envy—and 'envy,' said Jenner to me in his last days, 'is the curse of this country.' These are kept up by the canker of party and the taint of corruption."

"One of the greatest obstacles to reform of blood-letting and blistering, will be the prospective loss of guineas, half-guineas, five shillings, and half-crowns. I saw a farmer last summer come into a druggist's shop. Some one had told him, 'he must be cupped,' so he drove a bargain, and stepped into a back room. 'That fool,' said I, 'does not want cupping.' 'He does not look as if he did,' said the druggist, 'but *we can't afford* to let him go without.'"

Gentlemen, the next two communications are from an army medical officer, Mr. Hume, of the 45th regiment of foot—a gentleman, who from the nature of his duties, has the very best opportunity of testing any particular practice—and one who, were he to give a false report, must be at once contradicted by the regimental records.* His statements may therefore be relied upon with the most implicit confidence as correct. He first writes from:

Dover, 6th Dec. 1838.

"My object in writing is to congratulate you on the

* Whether false Reports are made or not by the Medical Officers of Civil Hospitals and Dispensaries throughout England, it is not for me to say; but the Tables of Mr. Farr prove that these officers make the deaths at their Institutions infinitely less than the average number of deaths of sick and *well* throughout the country! So that from their reports, it would appear to be a protection against death to be sick! —Duped and deluded Public! open your eyes.

moral courage you have evinced in your last two works. I have been now nearly *thirteen* years in the service—mostly in charge of an hospital, and it will be gratifying to you to know that an old fellow-student *adopts and carries out your principles* in his daily practice. I have *not* used the lancet these last TWO YEARS. My cases yield readily to warm baths, cold affusions, emetics and *quinine*. You may ask me where I have been? Four years in Jamaica, the rest in North America and Home service. If you had seen Marshall's Digest of the Annual Reports of the Army Medical Officers since 1827, you might have quoted it as a proof of your startling fact—the Unity of Disease. The more I read your book, the more I am convinced it is based on truth, and consistent equally with common sense and nature's laws. However little this age may appreciate your labours and the persecution you are likely to suffer from a certain class of doctors, every liberal mind must do justice to your unwearied zeal. Your holding up to ridicule the most fatal of all medical errors—bleeding a patient into a temporary calm and incurable weakness, ought to stamp you as the benefactor of mankind."

The same gentleman again writes to me from:—

Naas Barracks, Ireland,
5th Dec. 1839.

"My dear Dickson.—It is now twelve months since I wrote to you, saying that I had not used the lancet for the two previous years;—and I am now more convinced than ever of its utter inutility in the treatment of disease. Every day's experience confirms me in the truth of your doctrines. During the *last year*, I have neither bled, leeched, nor cupped in any case—and I have *not* had a single death of man, woman, or child. The depôt never was more healthy—and I *attribute this* principally to my *abstaining during the last three years* from every kind of depletion in the treatment of disease. I am satisfied that Pneumonia and Enteritis, which are at present the bugbears of the faculty, are indebted for their chief existence

to the remedies used for ordinary ailments — namely, bleeding, starvation and unnecessary purging. I never saw a case of either (and I have seen many,) of which the patient had not been the inmate of an hospital previously, where he had undergone the usual antiphlogistic regimen, or had been otherwise debilitated—as in the case of long residence in a warm climate. I am not surprised at the opposition you meet with. It has ever been the lot of those who have done good to humanity to be offered up as sacrifices at the altars of ignorance, prejudice and obstinacy. It is a fact related by Harvey, he could not get a physician above the age of forty to believe in the Circulation of that Blood whose VALUE in the economy YOU have so forcibly proved. Although I yield to you as your just due the origin of the improved principle of treating disease, I take credit to myself for being one of the first to carry it into effect, and I am doubtful whether a person in private practice could have so far overcome prejudice as to use the *cold bath* with the confidence I do in every kind of fever. Its power together with a warm one, is truly wonderful in equalizing the temperature of the body. When I compare the success of my treatment during the last few years with that of my previous experience, I feel inclined to curse the professor who first taught me to open the vein with a lancet.

Yours most truly,

T. D. HUME."

Dr. Dickson, Clarges Street, Piccadilly.

Gentlemen, at our next lecture, after some remarks on past and prevailing medical errors, we shall speak of Gout and Rheumatism.

LECTURE V. WILL APPEAR ON THE 1ST OF MARCH.

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LECTURE V.

FALLACIES OF THE FACULTY,

BEING THE SPIRIT OF THE

CHRONO-THERMAL SYSTEM.

BY

SAMUEL DICKSON, M.D.

FORMERLY A MEDICAL OFFICER ON THE STAF .

LONDON:
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"Dr. Dickson is a philosophic physician, (which it is rare to find in the present day;) he investigates *supposed* causes, and analyzes the moral as well as the physical faculties of man. His unique work on THE UNITY OF DISEASE has already produced a great commotion among his brethren, and we trust will induce them to think and reflect more than they generally do, instead of blindly following a routine of practice. We wish Dr. Dickson every success in his Herculean task of reforming, or at least placing upon some definite principle, the *so called* science of medicine. *Non*-medical readers should investigate Dr. Dickson's work."—*Colonial Magazine, edited by R. Montgomery Martin, Esq.*

FALLACIES OF THE FACULTY.

LECTURE V.

MEDICAL DOCTRINES, OLD AND NEW—GOUT—RHEUMATISM—CUTANEOUS DISEASE—SMALL-POX—PLAGUE—YELLOW FEVER—DYSENTERY—DROPSY—CHOLERA.

GENTLEMEN,

WHEN a young man has run the usual course of study at a university, he thinks he has learned everything worth knowing. But herein he grievously mistakes; for Lord Bacon tells us in his works, that "in the UNIVERSITIES all things are found *opposite* to the advancement of the sciences; for the readings and exercises are here so managed, that it cannot easily come into any one's mind to think of things out of the common road; or if here and there one should venture to use a liberty of judging, he can only impose the task upon himself without obtaining assistance from his fellows; and if he could dispense with this, he will still find his *industry* and *resolution* a great *hindrance* to his *fortune*. For the studies of men in such places are confined and pinned down to the writings of certain authors; from which, if any man happens to differ, he is presently represented as a *disturber* and *innovator*."

Gentlemen, in this passage you at once see the reason why Medicine has progressed so little from the time of Hippocrates to the present. Every person who has in any way improved the practice of physic has had to repent it. Harvey lost his business by discovering the circulation of the blood; Lady Mary Montague suffered in her reputation for introducing the small-pox inoculation, and Jenner for a long period was victimised for the still greater improvement of the Vaccine. His moral character was for years at the mercy of the most venal and corrupt members of the profession. "Such," in the words of Milton, "are the errors, such the fruits of mis-spending our prime youth at schools and universities as we do, either in learning mere words, or such things chiefly as were better unlearned." So far as they relate to Medicine, the doc-

trines of the schools have been a succession of the grossest absurdities. Let us briefly review them.

For several ages the state of the BLOOD was held to be the cause of all disease—no matter how the disorder originated. Had you a shivering fit from exposure to cold or damp, the "Blood" required to be instantly purified, —a fever from a bruise or fall, the only thought was how to sweeten "the Blood;" nay, were you poisoned by hemlock or henbane, "the blood" or its blackness was the cause of all your sufferings—and the chief anxiety was how to get rid of it. It never occurred to the physicians of that day that the blood was an indispensable part of the economy, or that "black blood" was better than no blood at all,—so on they bled and continued to bleed while a drop would flow from the veins. When their patients died, it was all owing to the accursed "black blood" that still remained in the system! How to get the whole out was the great subject of scholastic disputation, and treatises innumerable were written to prove that it might be done. In progress of time, another doctrine arose, namely, that all diseases first originate in the *solids*, and many were the partizans that took it up; so that for several centuries the *fluidists* and *solidists* divided the schools, and like Guelph and Ghibeline, ranged themselves under their respective leaders. What medical man is ignorant of the wars they waged, the ink they shed, and the eloquence they wasted upon the still unsettled point whether the solids or the fluids ought to bear the blame of first imparting disease to the constitution!

But from these let us turn to the doctrines of more modern schools. The chief feature in the professional notions of the day, is the assumption that all diseases may be traced to the "inflammation" or other theoretical state of a *given portion* of the body, one School taking one organ—another, another;—but why should I say ORGAN, seeing there are professors who exclusively patronize a given TISSUE, and others a given SECRETION even, which *one* thing, after they have wrapped it round in mum-

mery and mysticism, they gravely proceed to magnify into the very Daniel O'Connell of every corporeal disturbance! Exposure to cold and heat, the midnight revel and the oft repeated debauch—any, or all of these may have injured your constitution. This of course you already know and feel; so you wish to have the sense of your physician upon it. And what does he do? why, he takes you by the hand, counts or affects to count your pulse, looks at your tongue perhaps, and then with a seriousness becoming the occasion, he tells you, your "*Stomach* is wrong"—and so far, so true, as your own want of appetite and sensations of nausea abundantly testify. But as if this were not enough and more than enough, he must proceed to tell you the *cause* of your disease; and what does he say that was? Being a "stomach doctor," of course he says "the stomach" again. "The stomach," he tells you, is the cause of all;—your headache, tremor, and blue devils all proceed from "the stomach!" But herein if I mistake not, the doctor falls into the same error, as the man who seeing a house in ruins, should point to one of the broken bricks and saddle it with the whole amount of mischief; when in reality, it was only *one* of many *effects* produced by agency from *without*, such as accident, time, or tempest.

For a considerable space, the stomach held undisputed sway in the medical schools, John Hunter having contributed much to bring it into fashion. His pupil Abernethy afterwards coupled with it the "digestive organs;" and for a time nobody dared to dispute his dictum that the stomach and digestive organs were the cause of all disease. Some daring spirit however took it into his head to patronize "the *Liver*," and a very convenient substitute it became, for not only did it save the physician the trouble of thinking, but the patient by constantly directing his mind to it, very soon found out that the liver was the only organ of the body worth a moment's cogitation. Oh! "the liver," has put a great many fees into the pockets of the faculty, and might continue to do so still, but for Laennec's invention, the stethoscope.—Adieu then

to the liver, and adieu to the stomach and digestive organs! for from the moment people heard of this instrument the *Heart* and *Lungs* eclipsed them all. We have no liver and digestive organs in these days, we have only a heart and lungs! and these as the world wags are always in such a state, in such a deplorable condition of disease and danger, that Heaven only knows for what end they were given us unless for the benefit of our next door neighbour the apothecary! Never was such a catalogue of disease as these organs have entailed upon us;—but the curious thing is that nobody knew it until Laennec made the discovery by means of the stethoscope. Since then leech, lancet, cupping glass and purge have followed each other with unexampled rapidity;—but whether the "fits" and "sudden seizures," which now-a-days carry off so much mortality be the effect of these very safe and *gentle* remedies, or of the "Heart-Disease," under which the doctors in their innocence are pleased to class them, I leave to persons of common sense, and common discrimination to decide. One thing is certain, physicians have made a great professional stride since the days of Molière —for whereas in his time the only organ they ever thought or theorized about was the lungs; now, thanks to the stethoscope, they have got the heart with its valvular and vascular apparatus to the bargain.—So much for ORGANS, Gentlemen;—let us now speak of TISSUES. To be chronologically correct we must first take the "*Skin*"—for of skin, and nothing but skin, our bodies at one time would appear to have been entirely constructed. The skin was the medical rage, and the doctors were very certain, they had made a great discovery, when they turned their attention to it. Derangement of the skin explained every thing in existence and many other things besides; whatever your sufferings, the answer was always the same, "The skin, Sir! the skin!"—The skin solved every possible difficulty, and if patients were pleased, why undeceive them? Sick men do not reason; you must therefore treat them like children, and he who can best impose upon their credulity is sure to become the popular

physician. The skin however had a pretty long run, but like its predecessors it was destined to fall in its turn; to be supplanted by another tissue, "the *Mucous Membrane.*"—In the hands of Broussais the mucous membrane first rose to eminence. Bustling, active, ready, he first pushed it into notice; and so skilled was he in all the arts of scholastic juggling, that not only did he parry every blow aimed against it by the skin supporters, but he at last obtained for his favourite theme so great an influence in the sick room, that no patient of importance could be put to death legitimately* till *he* had first been called in to prescribe something for the "mucous membrane." Broussais thus became the French medical dictator—and the "mucous membrane" the French ruling doctrine. Carried by his numerous partisans and disciples into every commune of France, the "mucous membrane" at last found its way into England, where it was taken up by the late Dr. Armstrong—and an excellent stepping stone it proved to him in practice. Everybody came to hear what he had to say of their "mucous membrane." You could not have an ache in your back, or a cramp in your leg, but the "mucous membrane" was at fault;—nay, had you a pimple on your nose, or a pain in your great toe, it was still the "mucous membrane!"—Nor is this doctrine even now quite exploded. How many of the various SECRETIONS have run this gauntlet of accusation, it would be unprofitable to do more than allude to. The *Perspiration* was at one time much in vogue—and "checked perspiration" the reply to every inquiry—our grandmothers use the phrase occasionally still; though some of them betray a leaning to the system of the *Water*-doctors—a class of persons who only needed to inspect your urine to find out a cure for your complaint. Many curious stories come to my mind as connected with this;—but the subject is too grave to be trifled with—let us therefore pass from that

* The Rev. Sydney Smith, speaking of Taxes, bewails the apothecary; who he tells us is obliged to pay "a hundred pounds for the privilege of putting his patients to death!"

to "the *Bile*"—the mysterious cause of so much offending. How many difficulties has not this secretion mastered? How many has it not made where none existed before? You derange every organ and function of your frame by intemperance—"the bile"—not the *wine* is the criminal! You have head-ache from hard study, it is still "the bile;"—the palpable and obvious agencies going for nothing—while *one* of many *effects* produced by a common cause, is absurdly singled out as the father and mother of the whole!

There remains yet to notice another school of physicians, who ring the same changes upon a word, which having no very definite signification itself, may therefore signify any thing they have a mind, without in the least committing them in the opinion of the public. *Rheumatism, Gout, Scrofula, Scurvy*—what is the meaning of these terms? They are synonyms simply, having all a common import, *fluidity* or *humour*. In Rheumatism, we have merely a derivation from ῥέω, *I flow*, and Shakspeare used it in its proper sense when he said:—

> "Trust not these cunning *waters* of his eyes,
> For villainy is not without such *rheum*."

Then as regards Gout. This is not as many people imagine, a fanciful adaptation of the French word, *gout*, taste, but a corruption of *goutte*, a drop, and hence "blood-*gout*," a term which, if I mistake not, occurs more than once in the writings of the immortal poet I have just quoted. Scrofula, in Latin and Scurvy in Saxon have the same signification—namely, a "dry humour." Only think of dry-*humidity*, Gentlemen,—and the confusion of tongues during the building of Babel will occur to you as a type of the language in which Medicine is even now taught in most of our schools! Some German physicians of the present day tell us that scrofula has taken the place of scurvy in the European constitution. But this is only one of the many modes in which professors play at "hide and seek" with words. Diseases which the continental

doctors formerly termed scurvy, they now term scrofula, and heaven only knows what men will call the same corporeal variations before the world comes to an end. So much, Gentlemen, for the "*humoral* school,"—a school that impressed upon its disciples a doctrine of *purgation* scarcely less fatal than the sanguinary practice of the present pathologists. In fact, it is the identical system of "Morrison, the hygeist," and all those quacks, who, by their determined perseverance in purging away a fancied "impurity of the blood," have too often purged away the flesh and the lives of their credulous victims. Do the world at this time of day require to be told that you may purge a *healthy* man to death!—that by any class of purgatives, whether vegetable or mineral, you may so disturb every action of the body—may so alter every corporeal structure and secretion, that not one shall be of natural consistence or appearance! Even by the mildest of all purgatives, *rhubarb*, you may in a previously healthy body, so change the alvine secretions, that they shall take the form of any "impurity" you please—and for this impurity of *your own creation* you may, day by day and week by week, purge and purge till you have brought your patient to the state of inanition which constitutes, as we shall in the course of this lecture explain to you, the disease termed "ship scurvy." See then the effect of the *humoral* doctrine! But even this kind of folly appeared too *simple* to some teachers, and these taxed their invention to make nonsense *compound*. Who has not heard of *Rheumatic-Gout?*—and who will be so bold as to deny its existence? Yet, what is it but a self-evident absurdity? Its literal meaning is "fluid-fluidity." You might as well call an injury from fire, "an *igneous* burn!" Gentlemen, does such jargon convey to your minds the most distant idea of the true motions which take place in the body in the course of any one disease? How then can we wonder at men of observation laughing at the whole medical profession? It is only a *fool* or a *physician* who could be duped for a moment by such puerility; and Lord

Stowel was right when he hinted a man might be *both* at forty.

You now see the correctness of Dr. Gregory's remark, that medical doctrines are little better than "stark-staring nonsense." And God forgive me for saying it, but their authors, for the most part, have been very nearly allied to charlatans and impostors. As for the Schools, at this very moment, the whole *regime* of medical teaching is a system of humbug, collusion and trick—embracing intrigue and fraud of every kind—with the necessary machinery of Periodicals and Reviews by which the masters are enabled to keep down truth, and mystify and delude the student and country practitioner at their pleasure. Now, as formerly, each school of physic—

> "Bows the knee to Baal,
> And hurling lawful Genius from his throne,
> Erects a shrine and IDOL of its own,
> Some leaden calf"—

Who, by virtue of his puppet-position, maintains a reputation and a rule in matters medical, to which neither his merits nor his learning in the very least entitle him;—nevertheless he reigns the God of the day, and it is only in the next age that

> "The vulgar stare,
> *When* the swollen bubble bursts and all is air."

But, Gentlemen, what do the faculty of our own time mean by the term

GOUT?

Crabbe, who studied physic, but left the profession in early life to take orders, describes some of the doctors of his time, and among other things, he tells us:—

> "One to the GOUT contracts *all* human pain,
> He views it raging in the frantic brain,
> Finds it in fevers all his efforts mar,
> And sees it lurking in the cold catarrh."

Gout, then, may be any thing you please; for according to received opinion, this offspring of Nox and Erebus, this *vox et preterea nihil* takes shapes as many and Protean as there have been authors to treat of it. This much I may venture to tell you, that nothing will so soon help a man to a chariot as to write a book with Gout for its title—for being supposed to be a disease peculiar to aristocracy, every upstart is fain to affect it. You cannot please a mushroom squire, or a retired shop-keeper better than by telling him his disease is "gout"—"gout suppressed"—"gout retrocedent"—"gout" in this place, or "gout" in that! And what is gout?—

> "Of all our vanities the motliest—
> The *merest word* that ever fooled the ear,
> From out the schoolman's jargon!"

In sober seriousness is there such a *disease* as Gout? Gentlemen, as a "counter to reckon by," you may use the word; having first so far made yourselves acquainted with its real meaning that nobody shall persuade you that it is in itself anything but a piece of theoretical gibberish, invented by men who knew as little of disease and its nature as the tyros they pretended to illuminate. When a lady or gentleman of a certain age complains to you of a *painful swelling* in some of the *small joints* of the hand or foot, you may say if you please that such patient has got the Gout. If the same kind of swelling should appear in the *knee* or *hip* joint, or take the shape of an enlarged *gland* or a rubicund *nose*, you must then change your phrase, and you may easily exhaust a volume in pointing out the differences betwixt them. But as neither this kind of disquisition, nor the baptizing your patient's disease by one name or another can in the very least help you to cure it, it may just be as well to explain that this swelling, like every other malady incident to man, is not only a development of constitutional disease, but comes on in *fits* or *paroxysms*. Now, Gentlemen, you will find this fit in one case perfectly periodic and regular in its recurrence; in another not quite so determinate as to the time of its ap-

proach. The result of repeated paroxysms, as in other diseases where great heat and swelling take place, must be a tendency to decomposition, and in this instance, the product for the most part is a deposit of chalky or earthy matter. In that case nobody will dispute the name you have given to the disorder—but should the result of the decomposing action, be purulent matter or ichor instead of chalk or earth,—which neither you nor anybody else can know before hand,—you must not be astonished if a rival practitioner be called in to give the disease another soubriquet,—to christen it anew by some other phonic combination full as indefinite as the first, and which may thus serve you both to dispute about very prettily from one end of the year to the other, without either of you becoming a whit the wiser! You see then that the only difference betwixt what is called "Gout" and what is called "Inflammation" is that the result of the morbid action in the former case is earthy instead of purulent deposit, a *solid* instead of a *fluid* product. Now this difference may be accounted for, partly by hereditary predisposition, and partly by the age of the respective subjects of each. Young plants contain more *sap* than old ones, and the diseases of both must in some points vary; the blood of the old or middle-aged man contains the same elemental principles as that of infancy and youth, but these being in different proportions, the results of decomposition must *mutatis mutandis* be different. What are the CAUSES of Gout? One writer says one thing; another, another. Dr. Henry Holland is among the latest who has written upon the subject and he says the cause is "a *morbid* ingredient in the blood;" nay he says "it cannot be denied." But not only do I presume to dispute the dictum, but I challenge him to bring forward a tittle of proof in support of it. His whole doctrine of Gout, I apprehend is a fallacy; for if you enquire, the patient will tell you that he took too much *wine* the night before his first fit; or that he had got *wet;* or had been exposed to the *east wind;* or had been *vexed* by some domestic matter—So that you see the causes of gout are any thing

and every thing that may set up any other disease, small-pox and the contagious fevers of course excepted. A paroxysm of gout has been actually brought on by *loss of blood* and also by a *purge*, for which statement I have the authority of Parr and Darwin. What then is the remedy? If you ask me for a *specific*, I must again remind you there is no such thing in physic; and what is more, the man who understands his profession would never dream of seeking a specific for any disorder whatever. No, the remedies for gout are the same as cure other diseases; namely, attention to temperature *during the fit*, and the exhibition of the chrono-thermal or ague medicines *during the remission*;—for we have seen that like the ague it is a periodic disorder, and such is the description of it given by Sydenham who was half his life a martyr to it,—to say nothing of Dr. Samuel Johnson's explanation in his dictionary. That it comes on like the ague with cold shiverings, the experience of every case will tell you; but as your minds may be too much occupied with school theories to mark this fact for yourselves, I will give it to you in black and white in the words of Darwin. Speaking of some cases of the disease, he says: "The patients after a few days were both of them affected with cold fits, like ague-fits, and their feet became affected with Gout." To meet it in a proper manner you must treat the disease purely as an ague. With quinine, arsenic, opium and colchicum, I have cured it scores of times, and truth obliges me to say I have in some cases failed with all. Now, what can I say more of any other disease? That a perfect unity of type pervades all disorders is indisputable, and of the correctness of a unity of treatment, there can be as little doubt. What then are all the school divisions but "flocci, nauci, nihili, pili!" The following examples will suffice to shew you my treatment of gout.

Case 1.—Colonel D—— aged 60, had a fit of gout which came on every other night, for which leeches and purgation had been ineffectually prescribed, before I was called in. I ordered a combination of quinine and col-

chicum, but as this did not stop the fit, I changed it for arsenic, after taking which the patient had no return.

Case 2.—Captain M—— aged 56, had a fit of Gout which recurred every night during his sleep, I prescribed arsenic without effect; I then gave him quinine which acted like magic. The same gentleman twelve months after had a recurrence, but was much disappointed on resuming the quinine to obtain no relief. I then prescribed arsenic, which though it failed the year before, this time perfectly succeeded!—a lesson to such as would vaunt any remedy as a specific for any disease.

The influence of the Passions in causing or curing gout is well known. The following is one of many cases so *cured* which come to my mind. A clergyman was laid up with a severe attack of the Gout—his wife having heard of the effect of surprize in cases of the kind, dressed up a large *hare* in baby-clothes, and brought it to his bed-side, telling him how fearfully changed their child had become. The old gentleman eyed the animal with a look of terror, sprung out of bed, and complained of his foot no more!

Now, Gentlemen, as gout, like ague, is a remittent disease, and curable in the same manner,—whether by mental or physical agency,—what right have we to assume that its cause is a "morbid ingredient in the blood" any more than ague? Nevertheless, let us suppose for a moment that it really is the effect of a "morbid ingredient in the blood." What, let me ask, is this morbid ingredient doing all the time of remission? Does it *sleep* or *wake* during the period of immunity?—and how comes it that arsenic, quinine and colchicum so often neutralize its effects—while purgation and blood-letting, in many instances, produce a recurrence? In a word, is not this "morbid ingredient in the blood" a mere crotchet of Dr. Holland's brain—a goblin—a phantom—that, like other goblins and phantoms, disappears the moment the daylight comes in?

Having stated my reasons for dissenting from Dr. Holland's theoretic view of the cause of Gout, it may not be

out of place here to request your attention to some points of infinitely greater importance, upon which that physician and myself by some curious fatality maintain a remarkable coincidence of opinion. I quote the following passages from his "Medical Notes and Reflections."

"Has sufficient weight been assigned in our pathological reasonings to that principle *which associates together* so many facts in the history of disease, namely, the tendency in various morbid actions to DISTINCT INTERMISSION of longer or shorter duration, and more or less perfect in kind?" "The subjection of so many diseased actions to this common law, ESTABLISHES RELATIONS which could not have been learned from other sources, and which have *much value* even *in the details of practice.*"

Speaking of the Influenza and other Epidemics, Dr. Holland says: "I may briefly notice the singular analogy to the milder forms of typhus and of *intermittent fever* which these epidemics have occasionally presented." And he tells us that he has prescribed *Bark* in their treatment with advantage. Again, "It will probably be one of the most certain results of FUTURE research, to *associate together* by the connection of causes of common kind *diseases now regarded as wholly distinct* in their nature, and *arranged as such* in our systems of nosology. This remark applies very widely throughout all the *genera* of disease." "We can scarcely touch upon this subject of FEVER (particularly that which our present knowledge obliges us to consider as of idiopathic kind) without finding in it a *Bond* with which to associate together numerous forms of disease, but withal a knot so intricate, that no research has hitherto succeeded in unravelling it."

On the subject of Temperature, Dr. Holland thus speaks:—"The patient may almost always choose a temperature for himself, and inconvenience in most cases, positive harm in many, will be the effect of opposing that which he desires—his feeling here is rarely that of theory, though too often contradicted by what is merely such. It represents in him a definite state of the body in which the alteration of temperature desired is that best adapted

for relief, and the test of its fitness usually found in the advantage resulting from the change. This rule may be taken as applicable to all fevers, even to those of the *exanthematous* kind."*

Dr. Holland asks: "Is not depletion by blood-letting still too general and indiscriminate in affections of the brain and especially in the different forms of paralysis? I believe that the soundest medical experience will warrant this opinion. The vague conception that all these disorders depend upon some inflammation or pressure which it is needful to remove, too much pervades and directs the practice in them—and if the seizure be one of sudden kind, this method of treatment is often pursued with an urgent and dangerous activity." "Theory might suggest that in some of these various cases, the loss of blood would lead to mischief. Experience undoubtedly proves it, and there is cause to believe that this mischief, *though abated of late years*, is still neither infrequent, nor small in amount."

Gentlemen, if any of you be disposed to question by whose influence this abatement was principally brought about, I may suggest that from numerous letters I have received from medical men, long before Dr. Holland's volume first appeared, my writings must at least have in something contributed to it.† Dr. Holland's work from which I quote, was published by Messrs. Longman and Co. in 1839. Mark that date, Gentlemen; and mark also if you please, that it was in the year 1836—three years before—that the *same Publishers* brought out *The Fallacy of the Art of Physic as Taught in the Schools*, wherein I stated:—

1. "We hope to prove even to demonstration, that *Fever*, remittent or intermittent, comprehends every shape and shade which disorder can assume."

* Medical men understand by this, *Small-pox, Chicken-pox* and *Measles*—some include the *Plague* also.

† It is now the fashion of the *Eminents* to say: "Oh! we do not bleed as we used to do!" but not one tells us *who* first opened their eyes to their errors!

2. "That many cases of disorder have been observed to partake of the nature of *remittent* fever, and to derive benefit from the modes of treatment adapted to that periodic distemper, we are sufficiently aware. But we have yet to learn that any author, ancient or modern, *has detected that type, and advocated that treatment in every shade and variety of disease.*"

3. "That attention to temperature is the end of all medicine."

4. "That blood-letting might be advantageously dispensed with in all diseases, even in apoplexy."

Gentlemen, some of you may have read an anecdote of Dennis the Critic. Having invented a new mode of producing *theatrical* thunder, he submitted his discovery to the managers; but their high mightinesses only affected to laugh at it. Some weeks afterwards, he went to see a play, in which there was a thunder-scene. "Now, thought Dennis, is my turn—now I can afford to laugh at *their* thunder as much as they laughed at mine;" but judge his surprise, when instead of the farcical squall he expected, his ears were saluted with a thunder as terrible and true as the "hurly burly" of his own invention. Perceiving, in an instant, the trick that had been played him, he cried aloud, "By G—! that's *my* thunder!" This or something like this—always excepting the irreverent adjuration—was the sentiment that escaped me when I first perused the passages I have read to you from the *Medical Notes and Reflections*. "These are MY doctrines," I said, "aye—the identical doctrines which Dr. James Johnson, physician extraordinary to the King deceased, two years before stigmatized as a Pyrexymania, or *Fever*-madness. How will he receive them now—now that they are patronized at *second-hand* by an F.R.S. and a physician extraordinary to the QUEEN that reigns?" That was my exclamation—and how did he receive them, Gentlemen? Oh! he praised Dr. Holland to the skies, said he was this, and said he was that, and concluded by telling us that "it is impossible to lay down his book without an acquiescence in the decision of the public, which has placed

him in the first rank among the practical physicians of the capital;"* adding, moreover, that "his bearing towards his brethren is fair and open, and his *candid* mind instructed by *liberal reading* and polished by society, is willing to allow their *meed of merit* to all." But not a syllable did Dr. James Johnson say in condemnation of Dr. Holland's prophecy, that "FEVER" would one day be found to be "the *bond* with which to associate together numerous forms of disease,"—nor did he remind him that when that prophecy was actually *fulfilled* by me to the letter *years before* Dr. Holland took the trouble to make it, he, Dr. James Johnson, ridiculed it as a FEVER-MADNESS!—Gentlemen, if, in the course of his "liberal reading," the Author of the *Medical Notes and Reflections* never met with *the Fallacy of the Art of Physic as taught in the Schools*;—*nor* the review of it by his patron Dr. Johnson;—*nor* Dr. Conolly's equally honest criticism of it;—*nor* the controversy in the Lancet, to which the former gave rise;—*nor* heard in "society" the remarks made by the laughter-loving part of the profession, when that controversy was concluded—you must acknowledge the *coincidence* to be curious—startling! And, further, you must admit that this coincidence affords another of many proofs of the truth of a DISCOVERY, which, when Dr. Holland—with the candour, I am willing in common with Dr. Johnson to allow him—takes into account dates, facts and other similar trifles, I hope he will, in return, permit me now, henceforth and for ever to call MINE! Meantime, I have much pleasure in availing myself of the testimony of a physician *so* eminent, in favour of its "VALUE, EVEN IN THE DETAILS OF PRACTICE."†

* After all, Dr. James Johnson's praise of Dr. Holland's book is somewhat equivocal, seeing he states in summing up its merits, "Of all that *We* have said the present work is the *reflection*."

† Finding that my name was not even once mentioned in the *Medical Notes and Reflections*, I sent Dr. Holland my "Unity of Disease," (also published before his book). The Doctor politely wrote me, he *would* read it. I confess, I feel somewhat chagrined, that after the lapse of nearly a year, he has not thought it worth his while to explain in what manner *he* first discovered *my* discovery.

From this digression, let us turn to

RHEUMATISM.

Like Gout, the word *Rheumatism* conveys nothing beyond the expression of the false theory, which first gave rise to it. But as we are compelled by long custom to retain this among other equally unmeaning terms, I may tell you, that the profession of the present day class under it numerous affections of the great joints, particularly such as have come on suddenly, and are attended with much pain and swelling. You will find that these, in every case, have been ushered in by fever fits. The young and middle-aged are more liable to rheumatism than the extreme old. Like the gout, it is a *remittent* disorder and Dr. Haygarth, long ago wrote a work illustrative of the value of *Bark* in its treatment. My own practice is to premise an emetic; this I follow up with a combination of quinine and colchicum. If that mode of treatment fail, I have recourse to arsenic, opium, mercury, silver, turpentine, copaiba, guiaic, arnica montana, aconite and sulphur, or combinations of them—all of which remedies have succeeded and failed in ague. In most instances of acute rheumatism, the first combination proves successful; though in cases of long standing I have had to run from one medicine and combination of medicine to another, before being able to bring about this desirable termination;—and it is my duty to confess to you, that in some cases, particularly, where either much depletion, or much mercury, or both, had been employed—as I grieve to say, they too often are in the primary treatment—I have failed with every means that I could devise.

Under the head of Rheumatism, medical men also include certain muscular pains, which occur in various parts of the body, but are unattended by any apparent structural development. With nitrate of silver and prussic acid, I have often cured these pains; and with the cold plunge bath, I have sometimes succeeded after every other means had failed. Of my mode of treating acute rheumatism, I will give you two examples.

CASE 1.—A young man aged 25, had been suffering severely from Rheumatism four or five days before I saw him. At this time, the joints of his wrists and ancles were much swelled and exquisitely painful, his heart laboured and was so painful as to impede his breathing, his tongue was foul and furred, and he had been occasionally delirious. I ordered an emetic, which was some time in operating, but when it did, the relief was signal. I followed this up with pills containing a combination of quinine, blue pill, and colchicum, and in two days he was sitting up with scarcely any swelling remaining in the affected joints; in two days more he had no complaint. Not a drop of blood was taken in this case.

CASE 2.—A gentleman aged 30, after exposure to wet and cold, had a shivering fit with fever, in the course of which almost every joint in his body became swollen and very painful. He was bled, leeched, blistered and took mercury to no purpose, before I was called in. I ordered him a combination of quinine, colchicum and opium which agreed so well with him, that in three days, I found him free from every symptom, but weakness, which I presume was as much the effect of the former treatment, as of the disease; at any rate, he had certainly suffered very severely.

STONE.

But the Stone? you will doubtless, Gentlemen, ask me whether or not I look upon this as an *effect* of intermittent fever? To this question I have only to say, that stone must in the first place be admitted to be a result of morbid urinary secretion. Can any secretion become abnormal without the previous occurrence of constitutional change? Certainly not, and without such change, stone therefore could not become developed—moreover, there are times of the day, when the subject of it is better and worse, and this not altogether to be referred to the period of micturition. A "*fit* of the stone" is as

common an expression as a fit of the ague. Drs. Prout and Roget, who have paid much attention to *calculary* diseases state, that while medicines styled lithontriptics exert but little influence in such cases, *tonics* have almost universally ameliorated the condition of the patient;—and what are the medicines usually termed *tonics*, but the remedies for ague?

Whether Gout and Rheumatism be remittent diseases or not, or whether they be remarkable for the changes of temperature and action termed *fever*, nobody but such as prefer books of nosology to the book of nature and common sense, would be so ignorant as to question. Whether they be variations of the same disease, is another thing; but this I know, they are both first cousins to ague, and by treating them as such, the practitioner may save himself a world of trouble, and the patient a world of pain which neither might escape were he to adopt the doctrine of the "pathologists," that these are inflammatory diseases, and only to be subdued by leech, lancet and mercury to salivation. Gentlemen, laugh at the pathologists, and laugh too at disputations, which being all about nonsense, can never possibly come to a conclusion.

The calculary deposits which occasionally take place in the different joints during gout, suggested to medical men, even at an early period, the analogy subsisting betwixt it and stone. During constitutional disorders, calculus may be developed in any tissue or structure of the body. Salivary concretions are common; pulmonary calculi I have seen in two instances; in one case they were expectorated by a consumptive female, who died; in the other, by a patient of my own—a gentleman whose lungs being otherwise organically uninjured, recovered his health completely by attending to the temperature of his chest, and by the occasional use of hydrocyanic acid and quinine. This patient had previously consulted two of the best employed medical men in London, a physician and surgeon, who held out no hope for him but a warm climate. These practitioners, then,

shewed, at least, their good opinion of *attention to temperature.* How often the liver, gall-bladder and kidney are the seat of stone, I need not tell you. Taking place in the course of an artery, calculus is erroneously termed *ossification.* I wonder it never occurred to authors to call it the gout! seeing that there is, at least, this resemblance betwixt them, that both generally become developed after Middle Age has marked the subjects of them with her seal.

CUTANEOUS DISEASES.

There are not wanting authors who have traced an analogy betwixt gout and *Cutaneous Disease*; and as all disorders are cousins-german to ague, we must give them full credit for their powers of observation—stating, at the same time our readiness to help them out to a still more comprehensive view of the analogies which subsist throughout all "the various genera of disease."

What a fine thing to be able to master the cloud of ridiculous distinctions and definitions by which Drs. Willan and Bateman have contrived to disguise the whole subject of cutaneous disorder;—to distinguish, for example, psoriasis from lepra—erythema from erysipelas, diseases only differing from each other in being acute or chronic, or from being more or less extensively developed; all, too, depending upon the same constitutional unity and integrity of state—all more or less amenable to identical agency. What! I shall be asked, is Erysipelas or Rose nothing more than a result of ague—Erysipelas, for which, according to Mr. Lawrence, we must make incisions in the skin of, at least, a foot long—gashes, in short, like sabre wounds! Hear what Sir James M' Intosh says when describing his own case, and the accuracy of his description will scarcely be questioned, if it be remembered that previously to entering upon his legal career, he had not only studied but taken his degree in physic:—"We had an unusually cheerful day," he says, "but just as I was going to bed I was attacked by a *fit of shivering,*

which in the morning was followed by a *high fever*, and in two days by an erysipelas in the face. The disease went through its course mildly, but it is liable to such sudden *turns* (fits?) that one is always within six hours of death." For the value of quinine or bark in this disease I could cite many authorities, but the candour of Mr. Travers entitles his evidence to a preference. At a meeting of the Medico-Chirurgical Society, he is reported to have stated that in "a great many instances (of Erysipelas) he had found the most decided benefit from the use of *bark* and other *tonics*, and which at the commencement of the disease he had often seen highly useful in the practice of others, even in cases where *he would have employed the antiphlogistic treatment*, if the patients had fallen into his own hands."—*Lancet.*

Every medical man of experience knows that erysipelas is very often epidemic, seeming to depend upon a particular constitution of atmosphere; for during the time it is prevalent in camps or cities, the slightest scratch on the skin will set it up.—I have known it follow the application of a blister to the chest. Even at periods when the disease is not epidemic, it may be produced by any one of a thousand things that daily occur in life; cold and wet are frequent causes, and there are individuals who cannot take mercury in any dose without being liable to an attack of it—nevertheless, I have myself cured many cases with mercury. The best practice, however, is to treat it like other acute fevers: namely, by emetics followed up by arsenic or quinine; and this practice will apply to all acute diseases of the skin, by whatever names they may be known or distinguished.

What are the causes of cutaneous disease generally? Everything that can set up *fever*;—and what agent in nature when abused may not do that? Cutaneous disease may be produced by mechanical injury even—a blow or fall, for example. A friend of mine, who hunts a great deal, has had several falls from his horse, and on each occasion the accident was followed by an eruption all over his skin. I have known eruptions to be a constant effect of

the introduction of a bougie into the urethra of a particular individual. What will the gentlemen of the Humoral school say to this? for you know the partizans of that school trace all such diseases to a "morbid ingredient in the blood," and they look upon eruptions as an effort of nature to expel the "peccant humour." Be careful, they tell you not to drive it *in!* Now, what is an eruption but the effect of a tendency to decomposition of the matter entering into a detached portion of the cuticular tissue, so as to produce an arrangement and motion of the atoms composing it different from their motion and arrangement in health? Such caution, therefore, amounts exactly to this: be careful that you do nothing that shall make these cuticular atoms *resume* their respective places and motions in the economy, so as to resemble the healthy skin! See, then, to what a ridiculous pass the HUMORAL doctrine leads us! When that doctrine was more prevalent than it is at present, cutaneous diseases were very generally classed under the head of "Scurvy," or *Scorbutus*; whoever had eruptions on his skin of a chronic character, was said to have the scurvy. Now, if this phrase had been used simply as a sign or "counter to reckon by," no great harm would have ensued; but "scurvy," like "scrofula," and the "gout," in process of time came to perform the part, not of a sign merely, but of a corporeal *something*—an indefinite entity or essence, which like a will-o'-the-wisp, played its "fantastic tricks" now in this part of the body, now in that. Some wise professor made his pupils believe, that he had detected it *in* the blood even; and from that moment not only did people begin to find out that scurvy was a specific disease, but the whole faculty were anxious to discover a *specific* for it. A specific for what, Gentlemen? for an "airy nothing," that only existed in the theoretic visions of their own most mystified brains. You may stare as you please—but this, after all, is the truth. What then you will demand is the disease which doctors call "ship-scurvy?" Now to this most reasonable question, I will endeavour to reply in a

reasonable manner. Having been myself for months at sea without landing or seeing land, my evidence may be just as good as that of others who have handled the subject before me. During long and harassing voyages, what from being forced by foul weather to sleep under closed and consequently unventilated decks—what from being obliged to watch and work hard upon a short allowance of food and water—together with the anxiety and depression of spirits, produced by "hope deferred," the men gradually begin to shew signs of a constitutional "break up." You will find them with faces pale and bloated;—their skins rough, rugged, and exhibiting *petechiæ* and hæmorrhagic ulcers; their gums weak, spongy and bleeding; their hair harsh, dry, and falling away, and their bowels subject to fluxes; a low fever wastes them day by day and night by night, and they become, at last, so ill as to faint from the least exertion. This is Ship Scurvy, —not depending upon a something noxious *in* the blood, but upon a positive *want* of something essential to its healthy reproduction. And how think you is this disease to be cured? By wholesome food and pure air, you will naturally reply. No such thing, Gentlemen, nothing so simple would do for *scientific* people. It can only be cured by *Lemon juice*; lemon juice, according to them, is not only a *preventive* of the bad effects of starvation—but a substitute for pure air and proper food in the cure of diseases produced by a deprivation of both! Gentlemen, just about the time lemon-juice came into fashion as a cure for ship-scurvy, great improvements began to be made in navigation, as also in ship-building, and in the ventilating and victualling of fleets; voyages that formerly took up a year, can now be completed in a month or two, and the natural good effects of all this upon the habits and constitutions of the seamen are modestly claimed by the doctors as the result of their employment of lemon-juice. The wonderful thing is, that not only are there fools in the world, but philosophers also, who daily echo this trumpery story!

There is not a cutaneous disorder, however named, which

I have not cured with QUININE,—and I have met with examples of all which have baffled me with every remedy. I may here, nevertheless, state in regard to cutaneous disease generally, that with the following medicines I have not very often been at a loss—quinine, arsenic, oxymuriate of mercury, creosote, iron, lead—and in a very obstinate case of scald-head, the subject of which was a young artist of talent, a combination of belladonna and stramonium effected a complete cure in about a fortnight. The disease, in this instance, had been upwards of twelve months standing, and had resisted the prescriptions of some of the ablest men of Dublin and London. Baths, of which I shall afterwards speak, I have also found of great service in diseases of the skin—and what, Gentlemen, do all these remedies tend to at last, but to thermal change?*

In the great majority of instances, then, the local disorder *from* which physicians almost invariably name disease, and *to* which they almost as invariably confine their attention, is only one of many features of universal disturbance. So far from being the causes of such disturbance, the local tendencies to disorganization are merely hereditary or accidental developments occurring in its course—developments expressive, for the most part, of the weak points of individual constitution—though sometimes determined by climate or other specialty of cause. In England, for example, the viscera of the chest are the organs which chiefly suffer—while in the East, and West Indies, the liver and other contents of the abdomen become more frequently implicated. Remittent fever, I need not say, is the parent of both.

Injuries, passions, poisons, then, are each capable of producing the same constitutional disturbance with every kind and degree of organic lesion to which the subjects of

* Mr. Sanders, of Cheshunt, is celebrated for his treatment of cutaneous disease. This gentleman sees patients every Monday at the house of his brother-in-law, Mr. Harrison, the Crown Counsel, in Lincoln's Inn Fields. To the value of his mode of treatment, Mr. B. Cooper, among others, has given the fullest testimony.

them may by original weakness of configuration be predisposed. To use a homely phrase—"when the whole house shakes, the worst built room suffers most"—and this, of course, differs with every house. A blow on the head—nay, an injury to so minute a member as the finger, may produce general remittent disorder—*ending* in abscess of the lungs or liver, according to the predisposition of the patient.

SMALL-POX, OR VARIOLA.

Even in the course of the *exanthematous*, or pustular fevers, we daily find all kinds of organic lesion developed —lesion, which no man in his senses would place in the light of a *cause*. Among the organic and other changes induced by the fever of small-pox, I have noticed iritis, sore throat, deafness, dropsy, consumption, glandular swellings and rheumatism,—such *sequelæ* depending, doubtless, upon the original predisposition of the patient to the development of this or that complaint by any agency capable of injuring the general constitution. And how should it be otherwise, when we come to reflect that the small-pox fever, like every other fever, consists in a succession of paroxysms so exactly resembling ague, that before the appearance of the eruption, it cannot possibly be distinguished from it!—nor, so far as individual treatment is concerned, does this much matter—for however perfectly *specific* the *cause* of the disorder undoubtedly is, the disease itself admits of no specific mode of practice. To keep the patient as cool as possible during the hot fit, and to prolong the remission by opium, hydrocyanic acid, or quinine, comprehends nearly the whole duty of the physician in this, as in every other disorder. By a reverse course, the most perfectly curable case may be very speedily rendered confluent and malignant. While I attended the Parisian hospitals in the autumn and winter of 1825, the small-pox was epidemic, and the treatment was principally bleeding and purging. But so fatal was the disease, that almost every subject brought to the dissecting rooms of the French capital, was literally

covered with small-pox pustules. In the spring of 1824, a great many instances of the disease occurred in Edinburgh, and I remember the cases of two medical students, which from the difference of the practice employed, and from the difference of the results, made a strong impression on my mind. In the one case, the late Dr. Mackintosh, treated the patient by repeated bleeding and purgation. The consequence was, he became delirious—the pustules were rendered confluent, and he barely escaped with his life. The subject of the second case having frequently visited the former gentleman during his illness, may be fairly presumed to have taken the infection from him. But the treatment, in this instance, was restricted to an occasional antimonial, and an opiate about seven in the evening, which had the effect of either entirely preventing the anticipated paroxysm, or of rendering it so trifling as to pass without observation. On two occasions it was neglected, and a night of fever and restlessness was each time the result. The subject of this case was out of the house in ten days, and he has not a perceptible mark on his countenance, while the former was confined to his room for more than a month, and when he made his appearance in the streets, his face was so disfigured by scars, that his most intimate friends did not know him when he addressed them. In both cases, the subjects had been *vaccinated*, and bore the marks on their arms. Is Vaccination, then, a preventive? Recal to memory the numbers of persons whose faces were fretted and seamed by the small-pox in your younger days, and the few instances of a similar kind you meet with in these times, and the beneficial result of the measure must be at once evident. Do you doubt the preventive effect of small-pox against a recurrence?—No more can you doubt the effect of vaccination—for though small-pox does occasionally attack individuals who have previously undergone vaccination, so also does it recur occasionally in persons who bear the indelible marks of having previously suffered from small-pox itself. What is the vaccine but a modification of small-pox? It is small-pox in a milder form, a fact

which Jenner suspected, and which Mr. Ceely, of Aylesbury, has recently proved by a very simple experiment. He first inoculated a cow with the *virus* of a small-pox pustule. From the new pustules which were produced in that animal, he took matter and inserted it into the arm of a child. The *vaccine* pustule was the result!—and these experiments he has several times repeated with the same success in the presence of many medical men,—so that the *cause* of small-pox in man (whatever it be) becomes so altered in its vaccine modification, as to constitute a most valuable preventive against the severer form. What is the nature of the specific agent which produces and reproduces, through such an infinity of individuals an effect so generally specific? Can it be as Linnæus thought, of an animalculine character? or is it at all analogous to the influence produced by the magnet on iron? which metal, you all know, may from the contact, become itself magnetic. These are the most probable relations in which the subject may be viewed—if, indeed it have not some analogy to the continuation and reproduction of all animal life.

The following questions I am unable to answer.

1. Why is small-pox, when directly inoculated, more generally mild than when taken casually by infection?

2. Why, after vaccination, have we in the majority of cases only one pustule instead of many?

3. Why is the vaccine not infectious, like variola—seeing that it is a mere modification of identical agency? The vaccine can only, so far as we know, be communicated by direct inoculation.

4. Has the protection which the vaccine and the variola afford to the constitution against recurrence, any analogy to agricultural exhaustion—to the impossibility to obtain more than a given number of successive crops of a particular herbage, from a particular soil, in a given period of years?

The diseases which most resemble small-pox are chicken-pox, measles, scarlet-fever, and hooping-cough, inasmuch as these diseases for the most part affect the

constitution only once in life—though sometimes, like small-pox, they make their appearance twice, and even three times in individuals. By some authors, the chicken-pox has been supposed to be a modification of variola—an opinion to which I myself lean—for when we consider how remarkably small-pox becomes modified after vaccine transmission, we can scarcely doubt that it may admit of still further modifications by passing through the bodies of other animals besides the cow. This much is certain, that the contagious diseases have the most perfect analogy to the ague—seeing that all have remissions and exacerbations of fever more or less perfect in kind, and that all are more or less amenable to the chrono-thermal remedies—not one of which remedies, however, possesses such *specific* influence over them, as to be exclusively relied upon in the treatment of any case. Is not this the best of all proofs that there is no specific in physic—if in a most decidedly specific disease we have no specific agency, how can we possibly expect to find such for any one of the great family of disorders which may be produced by every thing that can derange the general health? Yet, Dr. Holland hopes that medical men may one day find a specific for Gout, and another for Consumption—diseases which may be produced and cured by any agency that can alter the moving powers of particular individuals!

PLAGUE.

Is the plague an intermittent fever? The case of Corporal Farrell as detailed by Dr. Calvert (Medico-Chirurg. Trans.) will be a sufficient answer to the question:—"This man had been standing in the sea, on the 10th of November, upwards of an hour, to wash and purify his clothes, according to an order to that effect. On coming out of the water, he was seized with violent shivering and headache, succeeded by heat of skin and afterwards by sweating, which alleviated the distressing symptoms. On the following day, the paroxysm was repeated. He was permitted to remain in the barracks from a belief that his complaint was intermittent fever. The next day his fever

returned as usual, but it now declared itself to be the plague by a bubo (glandular swelling) arising in the groin, while the seat of the pain seemed to be suddenly transferred from the head to that part. The paroxysm was again followed by an intermission or remission. But the next morning, while dressing himself to go the lazeret, he dropped down and expired."

Disputes still exist as to the contagious nature of plague. On whichever side truth lies, there can be no difficulty as to the proper treatment. The indications, as in simple intermittent fever, are to regulate the temperature in the hot and cold stages, and to prolong the remission by quinine, arsenic, &c., according to particular constitutions. Treated in this manner, the disease could not by any possibility be more fatal than we are told it is under the present routine of practice. "In all our cases," says Dr. Madden, "we did as all other practitioners did, we continued to bleed, and the patients *continued to* DIE." —(Madden's Constantinople.)

YELLOW FEVER.

From the same candid author I find that the Yellow Fever of the West Indies, is not less remarkable for its periodic remissions and exacerbations than for the shiverings and alternations of temperature characteristic of every other disorder. The yellow appearance of the patient, like the milder jaundice of our own climate, is the simple effect of spasm of the gall ducts. Jaundice, then, is more a symptom than a disease, being the result of spasm developed in the course of a febrile paroxysm. People will say, "You would not give quinine or bark in jaundice." But why not? seeing I could muster a good half hundred instances where I myself have cured the disease by one or the other. Dr. Madden details a case of yellow fever cured by quinine, a case in which he says "had the gentleman been *bled*, after the fashion of the country, I think in all probability he would have died; or had he survived, that he would have had left a debilitated constitution and a dropsical diathesis to encounter in his convalescence."

Previous to my embarkation for the East Indies, where it was my chance to serve five years as a medical officer of the army, I read Dr. James Johnson's work on the "Diseases of Tropical Climates." Imbued with his doctrines, I put his sanguinary treatment and his scruple doses of calomel to the test. But so far from confirming his assertions, my own experience led me to adopt conclusions much the same as those of Dr. Madden. Captain Owen, too, who could neither have a theory to support nor any interested end to serve, one way or the other, details at great length the mortality which took place among his people while employed in surveying the African coast. "It may, in fact, be questioned," says the intelligent navigator, "whether our very severe losses were not, in some measure, attributable to European medical practice, bleeding and calomel being decidedly the most deadly enemies in a tropical climate. During the whole time of the prevalence of the fever, we had not one instance of perfect recovery after a liberal application of the lancet or of this medicine." Captain Owen farther states, that he himself recovered without either bleeding or calomel, while the ship-doctor fell a martyr to his medical faith,—he bled himself, took calomel, and died!

DYSENTERY.

But the Eastern practitioner will tell me that Dysentery cannot be safely treated in any other fashion. Is he sure that he knows exactly what is meant by the word Dysentery? We shall say nothing of its etymology, but rather give the symptoms included by Sydenham under the name.—"The patient," he tells us, "is attacked with a *chilliness* and *shaking*, which is immediately succeeded by a heat of the whole body. Soon after this, gripes and stools follow." What then, Gentlemen, is this dysentery but an AGUE with an increase of secretion from the mucous surface of the bowels instead of the skin? Now Dr. Cumming, late of the East India Company's medical service, informs us, that while ascending the Nile in 1836, he was attacked with dysentery. After suffering for a

week with "intervals of remission," he fairly gave himself up, and so did his attendants, for he had nothing in the shape of medicine with him. As a forlorn hope, however, he ordered his guide to *sponge* him with *warm water*. And this simple remedy (attention to temperature), with fomentations of the abdomen, was the only treatment employed; he took a little wine and water, which remained upon his stomach; he then became drowsy, slept for a short time, felt his skin less hot and burning, and in brief, began to recover, and that rapidly. In about a week afterwards, he writes in his journal: "My recovery is almost complete, and the rapidity of my convalescence leads me to contrast my late attack with a *precisely similar one* which I had at Cawnpore in the autumn of 1829. On that occasion I was *largely bled* at the arm, had *fifty leeches* applied to the abdomen, and during the first four days of the disease, in addition to extensive mercurial frictions, I swallowed *two hundred and sixteen grains* of calomel. True, I recovered; or, *rather I did not die!* Whether in consequence, or in spite of the above heroic treatment, I will not venture to say. My face was swollen to an enormous size, every tooth was loose in my jaws, and for six or eight weeks I could eat no solid food. My constitution received a shock from which it never fairly recovered, and I was obliged to come to Europe on furlough. On the present occasion, fortunately for me, the *vis medicatrix naturæ* was my sole physician (he forgot the sponging part!), and I am now almost as well as before the attack commenced. BRITISH MEDICAL PRACTICE IN MY HUMBLE OPINION DEALS TOO MUCH IN HEROICS."

Such, Gentlemen, is a physician's account of his own case, and it will, I have no doubt, be a beacon to warn you against the sanguinary and mercurial practice principally introduced into the East by the influence of Dr. James Johnson's work on the Diseases of India. The prettiness and plausibility of that author's style will but poorly compensate the practitioner for the mortality that has too often followed a routine so contrary to common sense, and the very nature of things. What an idea, to first break

down by the lancet and mercury the attractive power of every atom of the body, in the expectation of thereby strengthening its weakest parts! Does this savour of *mania* or does it not? and that too, as I told you, of a rather homicidal kind. Yet Dr. Johnson boasts the success of his Works; how low must be the understanding of his readers!

We shall now speak of

DROPSY.

How can there be a morbid superabundance of any secretion without a corresponding change of temperature? He who will rigidly scrutinize this disease shall find that the same shiverings and fever which precede the sweat of ague, usher in the tumid abdomen and legs of Dropsy. Dropsy then may be termed an AGUE with *inward sweat.* That it is a remittent disease may be seen by the palpable diminution of the swelling on particular days, to say nothing of the hopes both of the patient and physician on such days being excited by general improvement throughout. How should the disease be treated? Not, according to modern practice, by diuretics and sudorifics solely; but by a combination and alternation of these remedies with the medicines of acknowledged efficacy in that most perfect type of all disease, the ague. Of cases successfully treated by me in this manner, I could give you hundreds, —but to what purpose? The recital would only comprehend the symptoms of ague with effusion of fluid into the cavities or cellular substance, instead of perspiration by the skin; and the remedies, as you may guess, quinine, opium, arsenic, hydrocyanic acid, combined or alternated with creosote, squill, ipecacuana, colchicum, mercury, &c. What other proofs do you want of the unity of all disease. The benefit of direct thermal change in dropsy, as in the other diseases of which we have treated, the following facts will shew:—The Paymaster Sergeant of the Royals had dropsy, which, notwithstanding the usual treatment by diuretics, purgatives, &c., was daily getting worse, when Dr. Stephenson, of the 13th Dragoons suggested the application of poultices of *lichen vulgaris* to the

loins. From that day the amendment was rapid, and the patient subsequently got well. Now, Gentlemen, everybody believed that there must have been some magical virtue in the lichen. But Mr. Brady, the surgeon of the regiment, thinking that the plant had less to do with the cure than the *heat* which, in the form of a poultice, it produced, determined to try a poultice made with *rice* in a case exactly similar. The result was the same—a cure; proving how right he was in his conjecture. Since I entered into private practice, I have repeatedly applied poultices to the loins with advantage, and have also, by means of plasters of pitch, galbanum, &c., succeeded in curing cases of dropsy, which resisted every kind of internal remedy.

CHOLERA.

Cholera, the scourge of nations—will cholera be found to partake of the same universal type of disease, the ague? You will be the best judges, Gentlemen, when we draw our parallel. In India we had ample opportunities for ascertaining its nature. Tremulous and spasmodic action are equally symptoms of ague and cholera; vomiting or nausea characterizes both. The ague patient has sometimes diarrhœa or looseness; oppression at the chest, and coldness of the whole body are the primary symptoms of each. The increased flow of pale urine, so often remarked in ague, is an occasional symptom of the epidemic cholera. In more than one instance of cholera, which came under my observation while serving in the East, that secretion passed involuntarily from the patient a short time before death. Suppression of urine, so common in the late epidemic, was a frequent symptom of the Walcheren ague. When there is no hot fit or reaction, death is usually preceded by a sleepy stupor in both. You have ague, too, with hot skin and bounding pulse, a state analogous to the milder forms of cholera, that is, when unattended with difficult breathing. When not fatal, cholera, like ague, has a hot and sweating stage. Moreover, when ague terminates life by a single paroxysm, you find the same

appearances after death in the bodies of both. Lastly, phrenitic, hepatic and splenic change with dysentery and dropsy, to say nothing of epilepsy and apoplexy, have been the occasional sequelæ of each.

What are the remedies most beneficial in Cholera? Attention to temperature comprehends every thing that has either failed or succeeded. Were I myself to become the subject of cholera, I should feel inclined to trust more to a bottle of brandy than to any thing contained in the Materia Medica. I saw many hundred cases while in the East Indies, but could never convince myself of the superiority of any medical treatment over another. The fact is, the whole nervous system seems to be so enfeebled by the cause or causes that nothing will rouse it from the death blow which it has received. In my work upon the Diseases of India, I have proved that death, in the great majority of instances, takes place from a palsy of the eighth pair of nerves,—those nerves that preside over the functions of the lungs and stomach.

At our next lecture, Gentlemen, we shall among other disorders consider Indigestion, Hysteria and Hypochondria.

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FALLACIES OF THE FACULTY.

LECTURE VI.

PRESENT STATE OF MEDICINE IN ENGLAND—DYS
SIA—HYSTERIA AND HYPOCHONDRIA—DISEASES
FEMALES—PREGNANCY — PARTURITION — TEET
—TUMOURS—CANCER.

GENTLEMEN,

THERE are three English authors who observed so
rectly, and thought so justly upon most things, that
always happy to avail myself of such passages in
writings, as bear, however remotely, upon the subj
have in hand. Gentlemen, need I apologize to any
for quoting, too frequently, Bacon, Shakspeare or Sa
Johnson? After a long intercourse with the world,
a rigid examination of what, in his day, was calle
wisdom, the great Chancellor, musing doubtless ove
own philosophical discoveries, thus writes:—"It is a
of delight to stand or walk upon the shore-side, and t
a ship tossed with tempest upon the sea, or to be
fortified town, and to see two battles join upon a p
but it is a pleasure incomparable, for the mind of ma
be settled, landed and fortified in the certainty of t
and from thence to descry and behold the errors, pe
bations, labours and wanderings up and down of
men." But, Gentlemen, however exciting this kir
pleasure be to him, who should be content with m
making a discovery to *himself*—the making of it
has its drawbacks; for "whoever, (in the words of J
son) considers the revolutions and the various ques
of greater or less importance, upon which wit and r
have exercised their power, must lament the unsucce
ness of enquiry, and the slow advances of truth, wh
reflects that great part of the labour of every writ
only the destruction of those that went before him.
first care of the builder of a NEW SYSTEM, is to den
the fabrics that are standing." But how can you
away the cobwebs of ages from the windows of t

without rousing the reptiles and insects that so long rejoiced in the darkness and secrecy which their foulness afforded—the bats and spiders, to whom the daylight is death! Truth, like a torch, tells two tales. Not only does it open up to mankind a path to escape from the thorns and briars which surround them; but breaking upon a long night of ignorance, it betrays to the eyes of the awakened sleeper, the bandits and brigands who took advantage of its darkness to rob and plunder him. What has Truth to expect from these?—What, but to be whispered away by the breath of calumny, to be scouted and lied down by the knaves and fools, whom interest or intercourse has leagued with the spoiler as partizans. Who will talk to me of conciliation? Who will tell me that mild and moderate measures ever brought over such implacable enemies to the ranks of their destroyer; or that robbers rioting in the spoil of their victim, will listen to the voice of the charmer, charm he never so wisely? Can people be in their senses, when they imagine that any exposition of Truth will be acceptable to men whose emoluments are chiefly derived from a course of studied and systematic mystification—Professors, who lure the student by every possible promise to their schools, and when once in their net keep him there by every possible artifice and pretext which collusion and corruption can devise! one day entangling him in a web of unmeaning sophistry—another, stimulating him to waste his time and labour in splitting straws, or in magnifying hairs—now encouraging him in a butterfly chace after shadows—now engaging him in wordy and worthless disputation with his fellows! Gentlemen, I appeal to you, if this is not the mode in which in most cases, from four to six years of the best part of a young man's existence are passed in our medical schools—passed in the fruitless endeavour to know a profession, upon the exercise of which, he is too often compelled to enter with no other pretensions to a knowledge of its principles than the trumpery certificates and diplomas *for* which he has been duped and deluded. How is that student to be repaid the capital

of time and money he has expended upon what he calls his education? How, but by deluding and mystifying in his turn the suffering sick who apply to him for relief. For relief?—Vain hope! Look at the numbers of persons who live, or try to live by physic,—physicians, surgeons, apothecaries, druggists, cuppers, nurses!—and ask yourselves how even one tithe of these can do so, but by alternately playing upon the passions and prejudices,—the hopes, fears, and ignorance of the public?—in one case by inflicting visits too numerous to be necessary; in another, employing draughts, mixtures, or measures, too expensive, too frequently and too fruitlessly repeated, to be all for the benefit of the patient! Think you, that the members of the medical profession are different in their feelings from all human beings—that their minds are so constituted, that under the most terrible temptations, they can so far set at defiance the stern law of *necessity*, as in their present crowded and starving state, receive with open arms a system that threatens so many of their order with ruin? Is it in the nature of things, that they will welcome a practical improvement, by which the practitioner may cut short, in a couple of days, cases and chances, which, by daily visitations, or by three draughts a day, might be profitably protracted to a month, if the system, on which it is based, were only advocated in calm, mellifluous and complimentary language? As soon may you expect the master of a sailing-smack to listen patiently to the praises of steam, or a coach-proprietor to admit the safety and superiority of railroad over coach conveyance, when estimating the losses he shall sustain by its too universal introduction. What, though the present condition of medical practice be less the fault of the *profession*, than the crime of the legislature, that permits men clothed with collegiate authority,—professors enjoying the sanction of its protection—annually to lure, by misrepresentations and lying promises, thousands of credulous and unsuspecting youths into a path strewed, even in the very best of times, with thorns and briars innumerable? Better far that one half of these should at once abandon a walk of

life, where the competition is so keen and close, that few or none, in the present day, can live honestly by means of it,—than, that they should hereafter have to eat their precarious bread, at the daily and hourly sacrifice of their own honour, and their patients' interests.—Who will tell me that half measures can be of any avail, under circumstances like these? Gentlemen, in corrupt and difficult times, half measures so far from succeeding, have either been taken as a sign of weakness in the cause, or as a symptom of timidity on the part of the advocate. Away then with half measures!—away with the idea of conciliating men, the already rotting tree of whose sustenance you sap—the long cemented system, of whose common existence depends not on a virtuous adherence to nature and truth, but upon a collusive and fraudulent perversion of both! When persons of ordinary understanding see men of established name supporting a system of dishonesty and error, they too often doubt the light of their own reason. "Would Dr. So-and-so (they ask) or Mr. Such-a-one, hold this language, if they did not themselves *believe* it—men so respectable, and so amiable in private life?—But tell these simpletons, that Dr. So-and-so's *bread* depends upon his *belief*—that Mr. Such-a-one's family would wither with his fading fortunes, if the father ceased to support that which he had so long supported, and which supported him—and you bring an argument, if not quite convincing, at least of a kind, to compel a closer investigation of the system it is your wish to expose and crush.—Gentlemen, I have been blamed for the tone and spirit in which I have spoken of my adversaries—I have been asked why assail their *motives*—why not keep yourself to their *errors?* But in this particular instance, I have been only the humble imitator of a great master—a man whose name will at once call up every sentiment of veneration—the indomitable Luther. *Magnis componere parva*, I have followed in his wake— I wish I could say *passibus æquis.* Think you, the Reformation of the Church could have progressed with the same rapidity, had its most forward champion been mealy-mouthed — had his lip been all

smiles, and his language all honey and politeness—or had he been content, in pointless and unimpassioned periods, to direct attention solely to the *doctrinal* errors of Rome? No—he thundered, he denounced, he heaped invective upon invective, and dealt in every form of language which could tell best against his enemies, whether in exposure or attack.—Too wise to leave them the *moral influence* of a presumed integrity, which they were far from meriting, he courageously tore away the cloak of sanctity and sincerity, with which, in the eyes of the vulgar, they had been too long invested. Had he done otherwise, he might have obtained the posthumous praise of moderation, at the price of defeat and the stake.—But, gentlemen, methinks I hear some one whisper me, that by paying my court to the apothecaries, and offering up incense at the false shrine of the professors, I might have easily and cheaply obtained the bubble reputation, to be blown me by their breath—that I might have held the medical sceptre by their support, and in this way have become the Radcliffe, Meade, or Baillie of the day—while, by exposing the intrigues of the schools and the collusions and corruptions of the professional world, not only do I stand as one man to a host, but I lay myself open to the secret stabs of a thousand unseen assassins. If such a one be among you, Gentlemen, to him I say—

> "Slave! I have put my life upon a cast,
> And I will stand the hazard of the die!"

That hazard now, thank Heaven, is small—for the numbers of upright and honourable medical men, who have already rallied round me, have placed me sufficiently far above the reach of my enemies, to enable me to despise them thoroughly; and I now feel as secure of victory, as at one period of my life I doubted success. As yet, I have only assailed the *system*—carefully avoiding individual attack. True, I have repelled the attacks of others, somewhat strongly too; but that was in self-defence. If in tearing away the veil of iniquity, I have not altogether remained unscathed, I have, at least, the satisfaction to know, that my enemies have not laughed at the blows I

dealt them; and this you may be sure of, that he who blames me most, has not felt me least. If it be said I have used language too strong for the occasion, I answer in the words of Burke: "When IGNORANCE and CORRUPTION have usurped the PROFESSOR'S CHAIR, and placed themselves in the seats of science and virtue, it is high time to speak out. We know that the doctrines of folly are of great use to the professors of vice. We know that it is one of the signs of a corrupt and degenerate age, and one of the means of ensuring its further corruption and degeneracy, to give *lenient epithets* to corruptions and crimes." To him who dislikes my mode of attack, I can only say—*Qui capit, ille fecit.* And now, Gentlemen, to the more orthodox matter of this lecture. When treating of Pulmonary Consumption, at a former meeting, we touched somewhat briefly upon

DYSPEPSIA OR INDIGESTION.

I then explained to you, if you remember, that no individual could possibly suffer from any disorder whatever, without his digestion being more or less implicated. When a patient labours under any severe form of disease, such as *gout, consumption,* or *erysipelas,* he has all the symptoms, or shades of symptom, that medical men group together under the head of Indigestion; but the gravity, prominence, or locality of the superadded symptoms, which disposes the physician to term the disease consumption, erysipelas, or gout, also disposes him to overlook, or esteem as insignificant, the coincident errors and disorders of the digestive apparatus. In the lower and more subdued forms of fever, the patient very often has no particular tendency to decomposition in any organ or locality, but from every function being more or less wrong, he very naturally turns his attention to his stomach or bowels, the errors of which come more particularly under the immediate cognizance of his feelings. Such a patient will complain to you of flatulence and acidity, or of that distressing sensation, termed "water brash." If you ask him about his appetite, he will tell you it is "so-so," or "he cares nothing about eating," or it is

positively "excellent"—which last, I need scarcely tell you, means that it is morbidly craving. Ten to one, it is capricious,—the patient now wishing for this, and now for the other, and rejecting what he desired most, the moment it is brought before him. Perhaps he has thirst. He is wearied upon the least exertion; has little inclination to get up in the morning, and when he does get up, he is indolent, and dawdles his time away. He is apathetic in mind as he is indolent in body; and he has often a great disposition to sleep, especially after meals. Others again will just be quite the reverse of all this; these perpetually harp upon some particular topic—fidget themselves and every body else about trifles, and look always at the dark side of life. Some fly in a passion for nothing, or upon the least contradiction, and in a few minutes after the gust of passion has passed away, they lament their mental weakness. Their nights are either sleepless or broken and disturbed by unpleasant dreams. One moment, they dream of robbers, from whom they cannot escape; or they are on the eve of tumbling down a precipice; dreaming sometimes within a dream—asking themselves, even in the very act of dreaming, whether they dream or not—and they will satisfy themselves by a process of *unreason*, that they are actually awake, and walk the air.

Even during the day, many dyspeptic patients have their dreams or reveries, pleasurable sometimes, but more often the reverse—they either see things as if "through a glass darkly"—or their perceptions are all exaggerated and unnatural. Phantoms may even pass before them at midday, phantoms such as they see in their dreams of the night. The very colours of things may be altered to their eyes—red appearing to them green, and vice versa. Even the shapes and dimensions of bodies may be quite changed to their sight—though the greater number have sufficient judgment remaining, to know this to be an optical delusion merely. John Hunter had the sensation that his own body was reduced to the size of a pigmy.

Light and shade have wonderful effects upon some patients. One is perfectly miserable, except when he is in the sunshine—another cannot bear the light at all. Ring-

ing in the ears, or partial deafness, is a common complaint of dyspeptic persons. Some can only hear distinctly during the noise of passing carriages, or in the hum of a city, or of falling waters; while others hear so acutely, that they complain of the ticking of the clock. The sense of touch is very often similarly vitiated;—one patient having partial or general numbness,—another, his feelings so sensitive, that he shrinks with pain if you merely touch him. Occasionally, though more rarely, you have examples of a reverse kind; the patient in that case will say—"Oh, do not take your hand away, the pressure does me good—it acts like magnetism."

All kinds of aches are complained of by dyspeptic patients—head-ache perhaps most frequently,—head-ache for which, on the theoretical assumption of fullness of blood in the brain, the leech, lancet, and cupping-glass are so frequently in requisition. But to what end? In the words of Abernethy, supposing such assumption to be correct—"Does blood-letting *cure* diseases in which there is a fullness of blood in the head? It must be granted, that in many instances, it temporarily alleviates them, but in others, it *fails to relieve*, and even *aggravates* them."

Gentlemen, what are those head-aches, those night and day dreams, all those various signs and sensations, but the effects of a weakened *cerebral* system, now brought on by one thing, now by another? I have known the most severe and distressing head-aches arise from loss of blood, and I have known them to originate in a long fast. Surely for such diseases, the leech and the lancet are not the proper remedies. But, Gentlemen, there are many other ways by which the brain may be weakened. You may as certainly exhaust it by prolonged literary or other mental labour, as by starvation or loss of blood; for there are times to think, and times to cease thinking; but if the brain be eternally harassed by over anxiety in any of the pursuits of life; if it be always at work on one subject, not only will there be head-ache, or confusion of head, but the constitution must be injured. How can this organ painfully revolve again and again the occurrences of

the *external* world, and give the proper attention to the *internal* economy, over which it presides? When you listen to an orator or a preacher whose discourse powerfully affects you, the brain becomes so much engaged, that it cannot, at the same time, attend to the breathing—and you are, therefore, compelled ever and anon to draw a long breath —you must take a deep sigh, to make up for the ordinary succession of short inspirations and expirations, which constitute the natural art of breathing. Now, Gentlemen, if the function of the *lungs* be so easily disturbed in this way, can you doubt that the heart, stomach, bowels and other parts, may be similarly influenced? What are the complaints of men, who have much on their minds, of bankers, merchants, and great lawyers?—What the diseases of *aged* persons—persons whose brains become gradually weaker and weaker by the slow, but certain operation of time?—Do not these patients constantly complain of giddiness, sensations like fainting with a fear of falling,* palpitations of their hearts, and of derangement of their stomachs? Their bowels are torpid and loose by turns.

One will tell you, he is troubled by a feeling of sinking and pain of stomach, which is only relieved by eating. Another suffers from spasm, and pain of the heart or stomach, with acidity or flatulence, the moment he begins to eat; and in these cases the pain may sometimes become so violent, that if it did not soon go off, the patient must die. Now, this kind of spasm, whether affecting the stomach or heart, is a disease, for which you are expected to give *immediate* relief, and nothing will do so more readily than a glass of hot water—water as hot as the patient can possibly drink it. This point of practice we owe to John Hunter, who having frequently suffered from spasm of the stomach, tried every thing he

* This giddy sensation or disposition to fall, is most commonly felt upon suddenly raising the head, or in rising from a chair. What surer sign of *inanition?* Yet I am at this moment attending two gentlemen, each upwards of seventy, who were bled and leached by their apothecaries for this disease of *pure debility!* Bless my soul! you may *bleed* a healthy man into this state any day.

could think of, and among others hot water. The ease which this gave him, led him to extend its use to his dyspeptic patients, and my own experience of its virtues, enables me to bear him out in the encomiums he has passed upon it. To this simple means, palpitations, spasms, head-aches, wind and acidity will all sometimes yield as to a charm. Is not this another instance in proof, how mere change of temperature acts on the body under disease? Now as hydrocyanic acid very frequently gives the same immediate relief in every one of these affections, we at once see that its medicinal power must depend upon the change of temperature which it electrically produces. Of the various cordials to which you may have recourse for spasmodic pain of the heart or stomach, there is none so good as *noyeau,* and the virtue of this "strong water" depends very much upon the *prussic acid* it contains.

Of all the remedies with which I am acquainted, there is none equal to this acid, in convulsions and spasms of every kind. But spasms of the stomach and heart are not the only ones of which dyspeptic patients complain. Some are troubled with a spasmodic tension of the brain or chest—others with a tightness of the throat, and some, particularly females, suffer from a spasmodic affection of the gullet, which gives them the feeling, as if they had a ball there. Others are subject to stitch or pain of the side, produced by cramp of the muscles of the ribs. Gentlemen, have I not proved to you, that many a *medical* lesson may be learned from the writings of Shakspeare. How correctly he described the nature of these pains, when he made Caliban say in the Tempest,

> "For this be sure, to-night thou shalt have *cramps,*
> *Side*-stitches, that shall pen thy breath up."

The common practice in such cases is to say, "draw your breath," and if the sick person cannot do so for the pain, "inflammation" is the theoretical goblin of the doctor, and blood-letting in some of its forms the too ready remedy to which he flies;—how vainly for the patient—how

profitably for himself, truth must one day tell! To small doses of nitrate of silver, prussic acid and quinine, such pains will often yield, after having resisted every form of depletion, with all the usual routine of blisters, black draught and blue pill, to the bargain.

The great error, of both patient and practitioner, in dyspeptic cases, is to sieze upon the most prominent feature, as the *cause* of all the others. In one instance they blame wind—in another acid. But it so happens, that these are only the common and *coincident effects* of a great cerebral weakness, and not the product, as many imagine, of fermentation of the food—they are *morbid secretions* from the lining membrane of the alimentary canal. And of this you may be assured, not only by the mode of their production, but by the manner of their cure, when that happens to be accomplished. Just watch a dyspeptic patient when he receives a sudden or unexpected visit; his "heart-burn," as he calls his acidity, comes on in a moment, and his bowels commence tumbling and tossing about, and will often *guggle* so audibly as to make even the bystander feel sorry for him,—shewing you clearly that this acidity, as well as the gases so suddenly extricated, are the effects of a weakened nervous system,—that they are, in a word, the common effects of wrong secretion. Now the term *secretion* is so constantly associated in the mind of the student with the notion of a *liquid*, that some of you may not all at once comprehend how gas can be secreted; but, Gentlemen, is not every tissue of the body the result of secretion?—are not the hair and the nails as certainly secreted as the saliva or the bile? Only place your naked arm for a few minutes under water, and you will find bubbles of air constantly forming upon it—such air being in that case actually secreted before your eyes by the glandular apparatus of the skin. Can you be at any difficulty now, to conceive how flatus is a secretion from the alimentary canal? If a doubt remains you have only to debilitate the brain of an animal by bleeding him slowly, and his bowels will become full of flatus, even to bursting. Then again, as

regards the cure of dyspeptic patients, a drop or two of prussic acid, twice or thrice a day for a week, or a short course of treatment by quinine, nitrate of silver, or alternations and combinations of these medicines will often do away for months, and even years with every symptom of wind and acidity—while cordials, alkalis, and mild laxatives, seldom do more than give a temporary relief. Oh! I never saw much good done by that placebo mode of practice—nor is this at all to be wondered at, if you reflect, that every part of the constitution of a dyspeptic patient, is more or less disordered. In every case of this kind, there is an unnatural temperature of body; some patients complaining to you of chills or heats, or alternations of both in the back, stomach, hands, feet, &c. In these cases the skin partially or generally, is either more moist than in health, or it is harsh and dry,—perspiring, if at all, with difficulty. In the latter case, some other secretion may be morbidly active. The urine or the bile may be in excess; or the natural adipose or aqueous deposit of the cavities and cellular membrane may be so far in superabundance, as to give the looker-on a false impression of the patient's case and condition. Should such a patient complain of his being ill, he is sure to be laughed at for his pains—for nobody has any sympathy with him—and this is one of the many cases in the world, where "appearances are deceitful."

The Dyspeptic patient is either torpid and with difficulty roused to exertion, whether corporeal or mental, or he is acted upon by every wind that blows. His spirits are depressed by the merest trifle, and raised again by a straw or a feather. Then as regards his actions or his promises, you can scarcely depend upon anything he tells you. What he is dying to do to-day—he is miserable till he can again undo to-morrow. He spends his life betwixt acting and regretting, hesitating, hoping and fearing by turns—one moment all confidence, the next all suspicion. Now, is not this one of the strongest of many striking proofs how much our *mental workings* are the effects of our material state—the result of our brain's condition, and

its *atomic* relations and revolutions? It is in perfect accordance with what we observe in all our corporeal motions. If the muscles be tremulous, can you wonder that the mind should be vacillating and capricious?—or when cramped and spasmodic, why should you be astonished to find a corresponding wrong-headedness, and pertinacious and perverse adherence to a wrong opinion?—*mens sana in corpore sano.* You may reason for hours to no purpose whatever with some patients. The plunge bath, or a short course of chrono-thermal treatment will make them alter their minds sooner than the most powerful and persuasive arguments of a Cicero or Demosthenes.

Lady Mary Montague held the notion that mankind hate truth. She formed her opinion doubtless from her observation of the higher classes of society, many of whom having nothing to do in the world but spend their money, are surrounded by a host of venal persons, tutors, toadies, flatterers, *et hoc genus omne;* and these lead them every way but the right; so that their minds and their bodies become equally vitiated. How can you expect the wrong brains of wrong bodies to reason rightly? These persons are like the inebriated, who see two candles where there is only one—their perceptions being false, so also must be their mode of reasoning; and it is, therefore, among such that the medical charlatan plays off his sleight-of-hand tricks with the greatest effect. The more unscrupulous and unprincipled he is, the more certainly does he fascinate and please his dupes. Let him only hold out to them an impossibility, and they will dance attendance at his door for months. Taking advantage of a popular but puerile prejudice against *mineral* medicine, he is very careful to prefix the word *vegetable* to his nostrum; and this he tells the public is *safe* in every form, dose and degree—which being in utter repugnance to every other thing in nature, is greedily swallowed by the multitude as an indisputable truth! Can weight, measure, heat, cold, motion, rest, be so applied to the human body with impunity? Can you without injury cover yourselves with any weight of clothes, swallow any measure of food, bear any scale of heat, run with any

degree of motion for any length of time? Or can you retain any part of the body in perpetual motion or repose without that part suffering? No, truly! responds the same dyspeptic, who believes that such and such a medicine is safe in every form, dose and degree! When treating patients of this class, it is better not to tell them what they are taking; but should they chance to find out that you have been giving them arsenic, prussic acid, or nitrate of silver, you will be sure to be bothered to death by questions, dictated sometimes by their own timidity and sometimes by the kind feeling of some disinterested friend secretly set on by an equally disinterested apothecary. Now, as these patients are for the most part great sticklers for authority, your only course is to tell the truth—which, after all, in nine cases out of ten, will make no impression—and that is the reason why the quack and the subordinate practitioner who can keep their medicines secret have an advantage over the honourable physician —an advantage so great, that in a few years, if matters do not take a turn, I doubt if one such will be found practising medicine at all. You may say then—what if it have no effect with patients themselves, will at least appear reasonable to their friends—that the medicines you ordered are all contained in the pharmacopeiæ of the three Colleges of Edinburgh, London and Dublin, and that they are therefore recognized as medicines of value by all physicians who have a character to make or a name to lose—that the dose which you give them is perfectly safe, inasmuch as if it *disagree* with their particular constitutions, it will only cause a short *temporary* inconvenience; and to sum up all, you may quote Shakespeare, who says, and says truly "In POISON there is PHYSIC."
And again:

> "Oh! mickle is the powerful grace that lies
> In herbs, plants, stones, and their true qualities;
> For nought so vile that on the earth doth live,
> But to the earth some special good doth give;
> Nor aught so good but strained from that fair use,
> Revolts from true birth, stumbling on abuse.

Virtue itself turns vice, being misapplied,
And vice sometime 's by action dignified.
Within the infant rhind of this small flower,
POISON hath residence, and MEDICINE power!"

So that Poison and Physic—whether vegetable or mineral — are *either* Poison *or* Physic according as they are wrongly or rightly applied.

But to return to Dyspepsia, or that *low fever* so termed. In cases of this kind my practice is to combine the chrono-thermal remedies with what you may call, if you please, *symptomatic* medicines. For example, where flatulence is the most prominent symptom I prescribe quinine, hydrocyanic acid, or nitrate of silver with aniseed or cardamoms. In acidity either of the two first remedies will often answer very well with soda or potash. Where the bowels are slow and torpid, rhubarb, aloes, or both, are very good medicines with which to combine any of the chrono-thermal medicines. In such cases purgative effervescing draughts are also useful. Should the patient complain of muscular or other pains, you may add colchicum or guaiac —and so proceed in a similar manner with other symptomatic remedies for other indications; keeping in mind, however, that these symptomatic medicines are merely a means of *secondary* importance in the treatment of a great constitutional *totality* of derangement. In addition to these measures, plasters to the back or stomach may be very beneficially resorted to in many cases of dyspepsia, and you may also run the changes upon various kinds of baths. The cold plunge and the shower baths are my favourites —though I need not tell you that the feelings of the patient after he comes out of it are a better guide to you in your choice and continuance of any bath than all the theories of all the doctors that ever wrote or reasoned upon disease and its treatment. "How do you think me to-day, Doctor?" is a question I am asked every day, and every day I give the same answer: "How do *you feel?*" If the patient is better, he says so; if worse, he will be sure to tell me he is not so well; and according to his answer do I change or continue his physic. Now,

whether this be common sense or not, I leave you to judge. Heaven only knows it is not *science*, or what very learned people call science—for when the patient says he gets worse and worse every day, science generally tells him to continue his medicine for that he has not taken enough of it, and that he will be worse before he be better—which I need not tell you is a lie—or more politely to speak—a theory. Should the patient die, why then he dies a natural death, and he has had the first advice, for not only did Mr. So-and-so, the fashionable apothecary attend him, but Dr. Such-a-one, the great physician, was also called in, and he said all was right, and that nothing better could be done. Had the doctor said all was wrong, he might perhaps have been nearer the mark—but in that case, what apothecary would either call him in again himself, or let him in when requested, where he could by a little gentlemanly trickery keep him out? The custom of the apothecary in such a case is to play upon the fears of the patient against "strong medicine;" to shrug his shoulders, and smile contemptuously. "Oh, I can tell you something of *him* (he says,) but you must not give me up as the author;" whereupon he proceeds to lie his life away, and then tells the patient: "If he still want another opinion he had better call in Dr. This or Sir Thingumy T'other," who happens, of course, to be his own particular puppet, and who would as soon think of differing with him or his opinion as of quarrelling with his breakfast, because it was purchased by the shilling of a dead man's guinea. Such is the present condition of physic! Such the low state of the profession, that in a few years it will not be possible for a gentleman to remain in it.

Never did any body of men want reforming more than the mass of the faculty at the present moment, and if people do not look a little sharper, they will find to their cost, that the impersonation of Physic, like the picture of Garrick, might be best painted with Comedy on one side and Tragedy on the other. Consultations, as I told you before, are generally mere *farces*—pleasant enough to the actors, but little conducive either to the health or happiness of those

for whose especial benefit they are *apparently* got up! Now, Gentlemen, in saying this much, not only have I acted *unprofessionally*, but I shall be sure to be roundly abused by the profession for it. All I say is—it is the truth, but *not* the *whole* truth; for the world is not quite ripe enough to believe all that I happen to know upon the subject. By and bye I shall tell them something will make their ears tingle!

Gentlemen, to return to our consideration of Disease. You now see that in all the cases of which we have spoken, the constitution is for the most part primarily at fault, and that the names of disorders depend very much upon some particular symptoms being more or less prominent than others. With every case of Dyspepsia, depression of spirits, and more or less mental caprice, and hasty or erroneous notions upon one or more points will be found to be associated. When such depression amounts to despondency, medical men, according to the sex of the patient, change the word dyspepsia into

HYPOCHONDRIA OR HYSTERIA.

And some professors are very particular in their directions how to distinguish the one from the other! Gentlemen, what is the meaning of *Hysteria?* It is a corruption of the Greek word ὑστερος, the *womb*; and it was a name given by the ancients to the particular symptoms we are about to consider, from a theoretical idea that in such cases the womb was the principal organ at fault. From the same language we also derive *Hypochondria*, a compound word formed of ὑπο *under*, and χονδρος *cartilage*, from the supposed seat of the disease, being the liver or stomach; for both of these organs, as you know, are situated under the *cartilaginous* portions of the lower ribs. So that when a female suffers from low spirits and despondency, with occasional involuntary fits of laughing, crying, sobbing, or shrieking, you must call her state hysteria; and when a male is similarly affected, you must say he has hypochondria. Now it so happens, that medical men sometimes pronounce even their male patients to be *hyste-*

rical! And this brings me in mind of an honest Quaker of the profession, who being very ill had three doctors to attend him—Mr. Abernethy, Dr. Blundell, and a physician whose name I now forget. Each of these had his own notion of the disease: Mr. Abernethy said, it was all owing to the state of the "digestive organs." Dr. ——— maintained that the "heart" was affected, and Dr. Blundell, in the true spirit of a physician-accoucheur, declared that their patient was only "hysterical." Now the patient, though a Quaker, was a humorist; so he ordered in his will that when his body should be opened after his death, his *digestive organs* should be presented to Mr. Abernethy, his *heart* to Dr. ———, and to Dr. Blundell his *womb*, if he could find one!

Gentlemen, that the *Brain* is the principal organ implicated in all disorders, more especially in such as are termed Hysteria or Hypochondria, the smallest reflexion will convince you. Suppose a person of either sex had been accidentally debilitated by loss of blood—a person who previously was strong in nerve, as in muscular fibre; suppose a letter comes with a piece of bad news,—the patient in that case, bursts into tears, laughs and cries time about, and then sinks into a state of dismal and gloomy despondency. And all this, forsooth, you must put down to the state of the womb or digestive apparatus, according to the sex of the patient, instead of to the account of the brain and nerves, without which the ill-timed letter, *the cause of all*, could not, by any possibility, have affected the mind in the least!

Another class of practitioners scarcely less unreasonable than those to whom we have just alluded, will have it, that patients coming under the head of hysteria and hypochondria, are not ill at all:—"Oh! there is nothing the matter with this man;" they will say, "he is *only* hipped!" and if the female, "she is *only* hysterical." Dr. Radcliffe, when he refused to come to Queen Anne, declared he would not stir a foot, "for there was nothing the matter with her but the vapours!" Such was the term by which the doctors of that day, characterized the shifting shades of symptom now called hysteria.

Gentlemen, do I require to tell you that no man or woman suffers from melancholy, or indulges in whims and fantasies, without being positively ill. Whoever labours under mental delusion or despondency has alternate chills and heats; and remissions and exacerbations of all the more prominent symptoms characterize the disorder in every form. The late Lord Dudley, in a letter to the Bishop of Landaff, gives his own case, and it is so likewhat you will daily meet in practice, that I shall give it in his own words: —" It is in vain," he says, " that my reason tells me that the view I take of any unpleasant circumstances in my situation is exaggerated. Anxiety, regret for the past, apprehensive uneasiness as to my future life have seized upon me as their prey. I dread solitude; for society I am unfit; and *every error of which I have been guilty in life* stands constantly before my eyes. I am ashamed of what I feel when I recollect how much prosperity I still enjoy, but it seems as if I had been suddenly transplanted into some horrible region beyond the bounds of reason or of comfort: *now* and *then* I enjoy a few hours *respite* (the remission?) ; but this is my general condition. It is a dismal contrast ; for you well remember that I was naturally gay and cheerful."

From this attack, Gentlemen, Lord Dudley recovered perfectly; nevertheless, at a later period of his life he had a return, but this time he was less fortunate, for the symptoms of his disorder gradually deepened until he became completely insane—a proof to you that the hypochondriac whim and the hysteric fancy differ from hallucination and mania in shade merely, and the chills and heats which precede or accompany them, from the cold and hot stages of the most intense fever, in nothing but degree. *So far as disease is concerned,* "All things do by scale ascend to UNITY." Dyspepsia, hypochondria, and hysteria then are mere modifications of chronic or habitual low fever, and since I commenced to treat them as such, I have had a practical success and a mental satisfaction which strongly contrast with the low opinion I entertained of the resources of our art and the vexation I experienced when I first entered upon

its practice. This much I must tell you, however, that in all kinds of chronic disorder, you will be obliged to change your remedies frequently—for what will succeed to admiration one day will often have an opposite effect the next; and this is just in accordance with what you find in every thing in life. The toy that will stop the cry of the weeping child to-day, may make it cry more loudly to-morrow. You must, in that case, change its rattle for some other gew-gaw; and so it is in chronic disease, where the temperament of the body, like the temper of the mind, is constantly varying. Look at the excellent effect of Travelling upon such patients. It is to the constantly shifting scene, and the frequent *novelty* with which their eyes, and sometimes their ears, are saluted that we must ascribe its chief advantages. Well then, the great secret of managing chronic diseases rightly, consists in the frequent change and right adjustment of the chrono-thermal and other remedies to particular cases. Whatever be the name by which you choose to designate your patient's complaint, youwill be sure to be disappointed if you pin your faith exclusively to any one medicine. To-day a mild emetic will give relief—to-morrow iron, opium, musk, quinine, or the bath. One week arsenic will be a divine remedy, the next having lost its power, you may dismiss it for prussic acid, valerian, creosote, strychnine, or silver. In regard to silver, the *nitrate* is the preparation which I am in the habit of using, and an admirable medicine it is, when properly managed. Boerhaave, the greatest physician that ever lived, speaks in raptures of its remedial powers in "nervous complaints." Cullen, Pitcairn, Baillie, every medical man but the illiterate apothecary, or the equally illiterate puppet who enjoys at the mercy of his breath the reputation of being, *par excellence*, a physician, will readily bear testimony to its safety and value as a medicine. Like every good thing, however, the nitrate of silver has been abused in practice, and in some half dozen instances it has been pushed to so great an extent as to have given the patient a permanent blueness of *skin* for life; but, Gentlemen, in these cases, the practitioners who employed it committed the double error of giving it too

long and in too great quantities; and that people should entertain a prejudice against it on that score, is just as reasonable as that a man should be afraid to warm himself when cold because his next door neighbour had burnt his fingers at the same fire. For myself, though I have prescribed the nitrate of silver in many THOUSAND cases, I never had the misfortune to give the slightest tinge to the skin of a single individual. Should your patient, however, after this explanation, still object to use it, you may be pretty sure that some ignorant or interested rival has been playing upon the timidity of him or his friends.

The shifting shades of mental distress, and the various vagaries and wrong thoughts—to say nothing of wrong actions—of the patients who come under the head we have just been considering, are so many and so multifarious, that to attempt to describe them all would be a mere waste of time and labour—inasmuch as however greatly they may appear to differ from each other in shape and hue, they all depend upon a similar totality of corporeal infirmity, and yield, when they yield at all, to one and the same system of corporeal treatment. A few instances, in proof, may suffice to show you this:—

CASE 1.—A married lady consulted me under the following circumstances:—Every second day, about the same hour, she had an unconquerable wish to kill her children, and when she happened to look at a knife, her terror, lest she should do so, was extreme. Now, as every function of this lady's frame was more or less wrong, I prescribed for her quinine with sulphuric acid. From that day she had no return of the homicidal feeling.

CASE 2.—A gentleman, every second day, took a fit of suspicion and jealousy of his wife, without the slightest cause whatever, as he confessed to me, on the day of remission, when he called to consult me; and however absurd and unreasonable the idea which haunted him, he found it impossible to drive it from his mind. Prussic acid and the plunge bath cured him completely.

Whoever, in his progress through life, takes the trouble to study individual character must be struck by the perversities, inconsistencies, and other *bizarreries* of the hu-

man mind. Many people, for example, commit crimes, follies, and faults involuntarily and without any apparent object. You all remember the case of Moscati, a person singularly gifted with talent, but who, at the same time, had such an invincible disposition to lie upon all occasions, that nobody would believe him, even when by accident he spoke the truth. A lady, who was once a patient of mine, told me that every time she became pregnant she caught herself frequently telling lies, for no end or purpose whatever. A gentleman, with high feelings of honour, was occasionally in the habit, when under the influence of wine, of pocketing the silver forks and spoons within his reach. His distress of mind, the next day, you can easily imagine, when he returned the articles to their owners. From these cases, you now see how much the *morale* of every one must depend upon his *physique*. Gentlemen, attention to corporeal temperature will be found of more avail in mending the morals of some individuals than a well-written homily. How many pretty things have been said *for* and *against* the morality of Suicide! I wish it were always in a person's power to abstain from it; but the disposition to commit it may be cured like many other bad dispositions by medicine!

In a letter which I recently received from Dr. Selwyn, formerly of Ledbury, now of Cheltenham, that gentleman gives the case of Mr. Samuel Averill, of the Plough Inn, Dynock, Gloucestershire:—"Before he came to me," says Dr. Selwyn, "he had consulted Mr. ———, of Ledbury, and other medical men, to no good purpose, as you can easily understand, when I tell you they principally went over the old routine of cupping, purging, &c. Mr. Averill's symptoms were depression of spirits to crying—thoughts of Suicide, fears of becoming a lunatic, sleepless nights, and, generally speaking, the greatest possible state of mental wretchedness. He passed immense quantities of urine, as pale and pellucid as water from the pump. Finding no particular organ in a worse state than another, I thought this a good case for your doctrines; and accordingly I rang the changes on the nitrate of silver, strychnine, musk, prussic acid, creosote, iron, quinine and opium—

varying and combining these according to circumstances with valerian, hartshorn, blue pill, &c. In a fortnight you would have been astonished at the improvement effected upon him. In about six weeks more he had no complaint, and he was with me about a month ago, when I considered his cure complete.

"I have treated a great many cases of Dyspepsia successfully, by attending to the *intermittent* principle, and I had lately a case of Tic Douloureux, which, after having been under the successive treatment of several eminent practitioners with no perceptible improvement, yielded to the chrono-thermal medicines. The subject of it, Miss T——, was formerly a patient of your own for some other complaint.

"I still hold that, in *chronic* diseases, by keeping your principles in view, we have a great help in many of these anomalous cases, which I would defy a nosologist or pathologist to name or classify; and as I am still consulted in such cases, I do not, I assure you, lose sight of them. Often, indeed, when I should, under the scholastic system, have been completely puzzled what to do, I now proceed at once to act upon the intermittent principle, and I have every reason to be satisfied with my success.

Believe me,

Yours faithfully,

CONGREVE SELWYN.

Dr. Dickson,
Clarges Street, Piccadilly.

Gentlemen, that the numerous diseases which medical men group together under the head of Dyspepsia, Hysteria and Hypochondria, are caused by circumstances from *without*, acting upon an infirm or debile brain *within*, might be proved by an infinity of facts.

The late General O'Hara was so sensible of the Levant wind, that before he rose in the morning, he knew if it had set in, by the effect it had on his temper; and during its continuance he suffered from a moroseness and irritability which no effort on his part could conquer.

Sir Woodbine Parish, in a late publication upon Buenos Ayres, tells us that "not many years back, a man named

Garcia was executed for murder. He was a person of some education, esteemed by those who knew him, and, in general, rather remarkable than otherwise for the civility and amenity of his manners. His countenance was open and handsome, and his disposition frank and generous; but when the *north wind* set in, he appeared to lose all command of himself, and such was his extreme irritability, that during its continuance, he could hardly speak to any one in the street without quarrelling. In a conversation with my informant, a few hours before his execution, he admitted that it was the third murder he had been guilty of, besides having been engaged in more than twenty fights with knives, in which he had both given and received many serious wounds, but he observed it was the *north wind,* not *he* that shed all this blood. When he rose from his bed in the morning, he said, he was at once aware of its accursed influence upon him:—a dull head-ache, first, and then a feeling of impatience at every thing about him, would cause him to take umbrage, even at the members of his own family, on the most trivial occurrence. If he went abroad, his head-ache generally became worse, a heavy weight seemed to hang over his temples—he saw objects, as it were, through a cloud and was hardly conscious where he went."—"Such was the account the wretched man gave of himself, and it was corroborated afterwards by his relations, who added, that no sooner had the cause of his excitement passed away, than he would deplore his weakness, and he never rested till he had sought out, and made his peace with those whom he had hurt or offended."

Gentlemen, there is nothing, perhaps, in the whole history of disease more curious than the readiness with which the paroxysm will sometimes yield to measures so simple and so apparently powerless in themselves, that it might almost seem puerile to suggest their application. Who among you, for example, could suppose it possible to

> Fetter strong madness with a *silken thread,*
> Cure ache with air and agony with words!

Had these suggestions come from the pen of any other poet but Shakspeare, you might readily be pardoned for supposing them the mere effusions of a heated fancy. But, Gentlemen, in these very lines, we have only a fresh illustration of the perfect acquaintance of this wonderful writer with every one of the multifarious subjects on which he touched—subjects in which, even those who make them professedly their study, will be surprised to find him excelling their very masters, in the depth and extent of his knowledge. Of the power of mere words over the morbid motions of the body, we shall afterwards have occasion to speak. Of the efficacy of a *thread* or *ribbon* in arresting the maniacal paroxysm, I shall now give you a striking example. "Mr. R. a chemist, naturally of a gentle disposition, voluntarily claimed admission to a madhouse in the Faubourg St. Antoine, on account of a desire to commit homicide, with which he was tormented. He threw himself at the foot of the altar, and supplicated the Almighty to deliver him from the horrible propensity. Of the origin of his disease, he could say nothing—but when he felt the *accession* of the fatal desire, he was in the habit of running to the Chief of the establishment and requesting to have his *thumbs* tied together with a *ribbon.* However slight the ligature, it sufficed to calm the unhappy R———; though in the end, he made a desperate attempt upon one of his keepers and perished, at last, in a paroxysm of fury."—*Annales d'Hygiène publique et de Médecine légale.*

Now, Gentlemen, without referring to the remittent nature of this man's complaint, the very means by which a temporary relief was obtained—the ribbon or ligature—will afford us an additional bond of connexion with which to associate together the maniacal *fit,* and the paroxysm of ague in the same category. Every physician of any information knows how successfully the ligature has been employed in that disease, especially when applied at the commencement of the shivering fit. It will also be found to connect both diseases with epilepsy, the paroxysm of which I have myself, in many cases, stopped by its assistance. Dr. Davis, in his account of the Wal-

cheren ague, tells us that he often succeeded in arresting the commencing fit, by merely grasping the leg or arm strongly with his hand. And in the case of a medical gentleman, who was seized with severe cramp in the muscles of his back while I was in his apartment, I suddenly caught hold of him by the arm and opposite leg. "My God!" he exclaimed, "I am relieved!" and his astonishment was extreme, for he immediately became warm and comfortable all over, though for days previously he had been suffering from cold feet and general malaise. The late Dr. Mackintosh, you all know, was loud in his praises of blood-letting at the accession of the ague fit, and many were the medical men, that were convinced of its efficacy in that disease. Now, Gentlemen, this, so called *fact*, was brought against me as a triumphant answer to my objections to the lancet; but mark its *fallacy!* mark how my opponents were deceived by their own experience!—The relief of which they boasted, temporary for the most part, instead of being produced by loss of blood, was, in reality, the effect of the *ligature* by which the arm was necessarily bandaged for the operation! Dr. Parr in his Dictionary, states that he has frequently succeeded in arresting the fit of *Asthma* by the simple application of the ligature, and scratching the skin with the lancet without drawing a drop of blood. How completely do these facts establish the unity of morbid action! Let us now speak of a few of the

DISEASES PECULIAR TO THE FEMALE.

The following remarks, though confined by their author to suppression of the Catamenial or monthly secretion, will be found to apply with equal force to the case of its preternatural abundance and also to its too frequent flow. "As this evacuation is a secretion, we might expect, that like all the secretions of the body, it would be most duly formed when the general health is the least impaired. The best means, therefore, of *eliciting the discharge* is by RESTORING A HEALTHY STATE to the *system generally.* We know that in that constitutional derangement called FEVER, the secretions from the liver, salivary glands,

skin, and all the mucous surfaces are suspended or lessened; but that they return with the decline of the febrile paroxysms. Would any person in his senses attribute the fever to the want of all or any of these secretions? Would he endeavour to relieve the patient by exhibiting specific medicines to stimulate each of these organs for the purpose of re-establishing their functions? Certainly not; he would look upon the fever as the cause, not the consequence, of the suppression, and he would *restore the secretions* by REMOVING THE FEVER. But change the case—let obstruction be a feature in the disease—the patient is impressed immediately with the idea that the obstruction is the cause of all her suffering—and she will frequently succeed in producing the same impression on the mind of her medical attendant. From that time, he disregards the primary cause, and directs all his attention to the restoration of peculiar functions by stimulating remedies. Nothing can be more unphilosophical than such a proceeding—no practice can be more injurious. It sinks the Science of Physic beneath the level of the commonest mechanical art, and degrades it to the meanest empiricism. It must lower it in the estimation of the public, and disgrace it in the eyes of the profession."—*Dr. Ramsbottom.*

Whoever takes the trouble to enquire, will find that in every case of Catamenial disorder—whether the secretion be too profuse, deficient or altogether suspended, the temperature of the loins is in an unnatural state—one patient acknowledging to chill—another to heat. In the former case, friction or a warm plaster—in the latter cold sponging will sometimes even singly contribute more to a cure, than a long course of medicine. Nevertheless with quinine, iron and the other chrono-thermal medicines, I have frequently obtained the most satisfactory results in every kind of disturbed menstruation. The subjects of *Leucorrhœa* or *Whites* will tell you they are one day better, another worse, that they suffer from heats and chills—but the discharge which is looked upon as the cause of all, is a mere feature or effect. In such cases, I prescribe quinine or iron in combination with alum, can-

tharides or copaiba ;—one medicine answering better with one patient, another with another. I have met with cases of painful *whites*, and also of painful menstruation which practitioners, as remarkable for the professional eminence they have attained, as for an utter want of the professional knowledge that alone should lead to it, had been previously treating with leeches,—some applying these to the loins (which in every case of whites is *weak* and consequently *painful*), some to the disgust of every woman of sensibility, introducing them even to the orifice of the womb itself. What practice can be more erroneous? What relief, if obtained, more delusive? You will tell me, and tell me truly, abstraction of blood from the arm. Yes! men who have written books upon the subject influenced, I presume, by the goblin inflammation have not scrupled to recommend this deadly measure in cases of whites and painful or suppressed menstruation. Gentlemen, such cases will, in general, yield readily to the chrono-thermal remedies, and the only topical application necessary is a plaster to the spine, to warm and to strengthen it, or warm or cold fomentation to the loins or womb, according as the one or the other may prove most agreeable to the patient's own feelings.

We now come, Gentlemen, to

PREGNANCY.

But this you will say, perhaps, is not a disease. Ask your wives or sisters, who have had children, and they will give you a catalogue of the complaints which they suffered during pregnancy, nearly as extensive as Dr. Cullen's Nosology.

PREGNANCY has been defined to be a *natural* process. So is death! I term it a *fever*, and one very clearly exemplifying the unity of type which pervades disease generally. Can the seedling become an herb in the frost of winter, or the sapling grow up into maturity without a series of changes in the temperature and motion of the surrounding earth?—No more can the infant-*germ* become the *fœtus* without a succession of febrile revolutions in the parent frame! Once in action it reacts in its turn.

During the early months, the brain, in attending to the new production, must, of necessity, to a certain extent, withdraw its influence from the functions of the mother. You have, consequently, the same alternations of temperature—the same shades of fever that may arise from any other agency affecting the brain in any unusual manner. Thus, like a blow on the head, loss of blood, &c., Pregnancy is ushered in by vomiting—in most instances, periodic and intermittent. The pregnant female complains of chills and heat—and blood drawn from her arm exhibits the identical crust which writers, under the name of "buffy coat," inflamed crust, &c., have delighted to enlarge upon as the peculiarity of inflammatory fever! Nay, the hereditary or constitutional tendency to derangement or decomposition of a peculiar organ, is often developed during the early months of pregnancy. Among the particular shades of disease which have come under my own observation, let me name epilepsy, apoplexy, loss of speech, and other palsies—carious tooth, consumption, spitting of blood, with many other structural and varicose affections—also mania. Some of these very disorders have been remarkably and favourably influenced by this as by other febrile states. The disease most familiarly known to the profession as capable of being suspended, and in some instances cured, by the fever of pregnancy, is Consumption. Where all other remedial means have failed, it is the duty of the physician to announce the *possibility* of a cure of this and other disorders by marriage.

PARTURITION we have already defined to be a series of pains and remissions. The commencement of labour is preceded by shiverings. "Sometimes," says Dr. Ramsbottom, "they are sufficiently intense to shake the bed on which the patient lies, and cause the teeth to chatter as if she were in the cold stage of an ague fit; and although she complains of feeling cold, the surface may be warm, and, perhaps, warmer than natural." Now you know that this chilly sensation is often complained of by ague patients even in the hot stage. Pregnancy and parturition then are intermittent fevers. When the fœtus is fairly developed in the one case, and the labour

completed in the other, health is the general result—but in the course of both as in other fevers every kind of disease may shew itself, and when developed even terminate mortally.

Abortion, I need scarcely say, is in every case preceded by the same constitutional symptoms as pregnancy and parturition. A lady who had been married several years, but who had never borne a living child, although she had had frequent abortions, consulted me upon the subject. Her miscarriages having always taken place at nearly the *same period* of gestation—about the end of the third month—I desired her when she should again become pregnant to send for me within a fortnight of the time she might expect to miscarry. She did so, telling me at the same time she knew she should soon be taken ill, as she had already had *shiverings*. I directed her to use an opium suppository nightly, which she did for a month, and she was thus enabled to carry her child to the full time. She has had another infant since, and both are now well and thriving. I have succeeded in similar cases with the internal exhibition of quinine, hydrocyanic acid, &c.

The tendency to return of any action which has once taken place in the constitution, is a law even in some effects of accidents. A lady, who from fright during a storm miscarried of her first child, a boy, never afterwards, when pregnant with *boys*, could carry them beyond the time at which she miscarried of the first. On the other hand she has done well with every one of her *daughters*, five in number, all of whom are at this moment living.

To mothers and nurses, next to pregnancy and parturition, there is no subject so interesting as that of

TEETHING.

The birth of the first tooth, like the birth of a first child, is commonly expected by both with a certain degree of anxiety, if not with fear. Why is this? Why, but because as in the case of pregnancy, *before* the dormant germ can be called in action—*before* the embryo tooth can

be developed—there must be a complete corporeal REVOLUTION; in other words, an intermittent *fever*, of more or less intensity, varying according to the varying shades of particular constitutions. The more healthy and vigorous the child, the more subdued will this fever for the most part be, and the teething will consequently be less painfully accomplished; just as under the same circumstances, the parturient mother will more surely bring forth her young in safety. In those cases, on the contrary, where the child is weakly or out of health, the fever will be proportionally severe. The generality of teething children, after having been comparatively well during the day, become feverish at a particular hour in the night. Now, the newly developed tooth, though in the first instance itself a mere effect of the fever, very soon contributes, by the painful tension which its increasing growth produces in the gum, to aggravate and prolong the constitutional disorder. It is first an *effect*, and then a superadded *cause*, or aggravant. Gentlemen, in this fever we have a fresh illustration of the unity of disease—a fresh proof that intermittent fever is the type of all corporeal disorder. How many varieties of disease may not be produced during the *intermittent* fever of teething; every spasmodic and paralytic distemper you can name—epilepsy, convulsions, apoplexy, lock-jaw, squint, hemiplegia, curved spine, with all the family of structural disorders, from cutaneous rash and eruption to mesenteric disorganization and dysentery. Should the gum be lanced in these cases? Who can doubt it? If you found the painful tension produced by the matter of an abscess keeping up a great constitutional disorder, would you not be justified in letting out the matter with a lancet? The cases are similar. In many instances of teething, then, the gum lancet may be used with great advantage—but with greater advantage still may you direct your attention to the temperature of the child's body. When that is hot and burning, when its little head feels like fire to your hand, pour cold water over it, and when you have sufficiently cooled it throughout, it will in most cases go to sleep in its nurse's arms.

During the *chill fit*, on the contrary, you may give it an occasional tea-spoonful of brandy and water, with a little dill or aniseed to comfort and warm it—having recourse also to friction with hot flannel, or to the warm bath. In the *remission*, small doses of calomel, quinine and opium, with prussic acid, occasionally, will often anticipate the subsequent fits, or render them trifling in comparison with those that preceded them.

But, Gentlemen, I may remark to you that you will sometimes be met with considerable opposition on the part of the wiseacres of the profession, when you propose quinine or prussic acid in infantile disease. It was only three weeks ago I was requested to see the infant son of a gentleman in Hertford Street. This child had been suffering from convulsions, thirteen distinct fits of which it had had in succession before I was called in. Though its age was less than six months, the surgeon in attendance had ordered it to be cupped; the quantity taken was an ounce, but the fits were not thereby stopped; and this will not surprise you when you reflect that *loss of blood* of itself is a *frequent cause of convulsions*. In the interval of the paroxysms I suggested quinine in small doses, as a preventive against recurrence. The *Sangrado* in attendance *stared*, but acceded—but the fit, notwithstanding its exhibition, returned. I then, on my own responsibility prescribed prussic acid, and not only had the infant no recurrence of the fit, but the flatulence with which the abdomen was previously tumid began to diminish from the moment it took it. The child is now in every respect well and thriving. You may perhaps ask me in what dose I prescribed the prussic acid in this case. I ordered *one drop* to be mixed with *three ounces* of cinnamon water, and a tea-spoonful of the mixture to be given every two hours all that day—so that there is no earthly agent, however powerful, even in a *small* quantity, that may not, by dilution, or some other mode of diminution, be fined away to any state and strength—to any age or condition of life for which you may be desirous of prescribing it. In this respect, medicine resembles every thing in nature. Take

the case of colours. The most intense blue equally with the deepest crimson, by the art of the painter may be so managed that the eye shall not detect, in his design, a trace of either one or the other. In the case of the infant just mentioned, the dose of prussic acid was about the *twenty-fourth* part of a drop, and its good effects were very immediate and very obvious. Nevertheless, when the attending surgeon came in the morning to see the little patient, then completely out of danger, he was so horrified by the medicine which had produced the improvement, that he stated to the family he could not, in conscience, attend with me any longer. And so this very *timid* practitioner took his leave of the child which he himself had brought into the world, and all because he, a man-midwife! could not approve of the treatment that saved its life. Yet this was the person who, without hesitation, let loose all at once the *eight* lancets of that devilish piece of chirurgical ingenuity the cupping instrument on the head of the same infant, whose age, be it remembered, was under six months! If this be not starting at a straw and leaping over a hay-stack, I know not what is.

One of the greatest obstacles to improvement in medicine has been the employment of male instead of female practitioners in cases of midwifery. For by means of that introduction, numbers of badly educated persons not only contrive to worm themselves into the confidence of families, but by the arts to which they stoop, and the collusions and other artifices which they employ, they have managed in a great measure to monopolize the entire practice of physic in England. To check the career of these persons, Sir Anthony Carlisle wrote his famous letter to the "Times," wherein he declared that "the birth of a child is a natural process, and not a surgical operation." Notwithstanding the howl and the scowl with which that letter was received by the apothecaries, there cannot be a doubt that more children perish by a meddlesome midwifery than have ever been saved by instrumental aid. How many perish by unnecessary medicine, common sense might form a notion—for the fashion of the day is to commence with physic the moment the child

leaves the womb—to dose every new-born babe with castor oil before it has learnt to apply its lip to the nipple! Who but an apothecary could have suggested such a custom? Who but a creature with the mind of a mechanic and the habits of a butcher would think of applying a cupping instrument behind an infant's ear to stop wind and convulsions? The nurses and midwives of the last age knew better. Their custom in such cases was to place a *laurel*-leaf upon the tongue of the child. The routinists laughed of course at what they called a mere old woman's remedy: they supposed that it could have no effect whatever; for they did not know that its strong odour and bitter taste depended upon the *prussic acid* it contained! Gentlemen, you may get many an excellent hint from every description of old woman but the old women of the profession—the pedantic doctors, who first laugh at the laurel-leaf as *inert*, and yet start at the very medicine upon which its virtues depend when given with the most perfect precision in the measured form of prussic acid!—men who in the same mad spirit of inconsistency affect to be horrified at the mention of opium or arsenic, while they dose you to death with calomel and calocynth, or pour out the blood of your life as if it was so much ditch-water!

Gentlemen, there is such a thing as HEREDITARY PERIODICITY. If you take a particular family, and as far as practicable, trace their diseases from generation to generation, you will find that the greater number die of a particular disease. Suppose this to be pulmonary consumption. Like the ague, which makes its individual revisitation only on given days, you will find this disease attacking some families only in given generations—affecting every second generation in one case; every third or fourth in another. In some families it confines itself to a given six, while in the greater number, the ages at which it selects its victims is equally determinate—in one appearing only during childhood, in another restricting itself to adult life or old age. By diligently watching the diseases of particular families, and the ages at which they respectively reappear, and by directing attention in the earliest stages of constitutional disorder to those means of prevention which I have in the course of these lectures

so frequently had occasion to point out to you, much might be done to render the more formidable class of disorders of less frequent occurrence than they are at present. Mania, asthma, epilepsy, &c., might thus, to a certain extent, be made to disappear in families where they had been for ages hereditary. But, alas then for the medical profession, the members of which might in that case exclaim :—"Othello's occupation's gone!"

TUMORS.

With a few remarks on the nature of tumors, Gentlemen, I shall conclude my observations on particular diseases. It is a common error, on the part of medical men, to state in their reports of cases, that a *healthy* person presented himself with a particular tumor in this or that situation. Gentlemen, such practitioners have busied themselves with artificial distinctions—distinctions which have no foundation in nature or reason—to the neglect of the circle of actions which constitute the state of body termed health. Never did a tumour spring up in a perfectly healthy person. In the course of my professional career, I have witnessed tumors of every description, but I never met one that could not be traced, either to previous constitutional disturbance, or to the effect of local injury on a previously unhealthy person. Chills and heats have been confessed to by almost every patient, and the great majority have remembered that in the earlier stages, the tumor was more or less voluminous.

Every individual, we have already shewn, has a predisposition to disease of a particular tissue. Whatever will derange the general health, may develope the weak point of the previously healthy, and this may be a tendency to tumor in one or more tissues. The difference in the organic appearance of the different textures of the body, will account for any apparent differences betwixt the tumors themselves; and where tumors appear to differ in the same tissue, the difference will be found to be only in the amount of the matter entering into such tissue, or in a new arrangement of some of the elementary principles composing it.

It is a law of the animal economy, that when a given se-

cretion becomes morbidly deficient, some others make up for it by their preternatural abundance. If you do not perspire properly, you will find the secretion from the kidneys or some other organ increase in quantity. I was consulted some time ago by a female patient, whose breasts became enormous from excess of adipose or fatty deposit. Now, in the case of this female, the urine was always scanty, and she never sweated. Every tissue of the body is built up by secretion. The matter of muscle, bone and skin is fluid before it assumes the consistence of a tissue, and the atoms of every texture are constantly passing into each other by what may be called vital chemistry. "The great processes of nature," says Professor Brande, "such as the vegetation of trees and plants, and the phenomena of organic life, generally, are connected with a series of chemical changes." Secretion of every kind is the effect of chemical change, and tumours, instead of being produced, as Mr. Hunter supposed, by the organization of extravasated blood, are the result of errors of secretion. They are principally made up of excess of some portion of the tissue in which they appear, or are the result of new combinations of some of the ultimate principles which enter into its composition.

Of the various tumours which become developed in the human body, there is none which has so much engaged attention as

CANCER OR SCHIRRUS.

The *breast* of the female and *testis* of the male are the parts that become most frequently involved. Now, what is Cancer? What but a slow and painful decomposition of the particular organ affected—a decomposition in which from new deposits and new combinations of matter, the part takes on a hardness or softness, destructive in many instances of its natural texture and appearance. Does it much signify whether, when cut asunder, the decomposed organ exhibit a fungoid, semi-cartilaginous, or other unnatural appearance, if its texture be so completely changed that it can no longer perform its natural functions? To hear the disputes and discussions which take place in these cases, you might imagine that life and death depended upon the something more or the something less of

this or that hardness which the organ betrayed when touched or handled. Gentlemen, smile at such discussions, and laugh too, if you please, at the disputants.

In the case of the female breast, the decomposition called cancer seldom occurs till about the period when the organ ceases to be of use in the economy, namely, when the catamenial secretion is about to terminate for life. Gentlemen, I never met with a case of this kind in which one or more secretions were not imperfectly performed, and none in which the patient did not acknowledge to heats and chills; to say nothing of variations in the temperature, volume, and sensations of the affected organ. I am, at this moment, attending a lady with a tumour of this description, who was first induced to consult me from being told that I looked upon ague as the type of all complaints: she ascribed the commencement of the disease to a sudden chill, and to the repeated shivering fits from which she suffered in consequence. Now, this lady stated to me that she had consulted an eminent surgeon, and that he had ordered her leeches, but the effect of their employment was an increase of the pain; and no wonder, for if that surgeon had taken the trouble to inquire, he would have found that instead of the theoretic "inflammation," which doubtless suggested their application, the breast, in this case, was always cold! By attending to the temperature of the body, and by exhibiting quinine, arsenic, opium, &c., during the interval of immunity from pain and fever, I have obtained the most satisfactory results in the earlier stages of cancer, and relieved the symptoms in the great majority of cases where, from the state of the organ, a cure could not be expected. But Cancer is a *Chronic* disease—a disease of *time*, and you must remember what I have said upon the subject of chronic disease generally, namely, that no single remedy will produce its beneficial effect for any great length of time in these disorders. You must therefore change, combine, and modify your medicines and measures in a thousand ways, to produce a sustained improvement. Iodine, tobacco, the muriates of gold and mercury, arsenic, creosote, lead, &c., may all be advantageously employed, both as internal remedies and local applications, according to the changing

indications of the case. Harmonize by every possible means the actions and secretions. The lady, to whose case I have already alluded, seldom perspires. When she does so moderately, she is free from pain, and the tumour diminishes in size. When on the contrary she perspires profusely, the breast increases in size, and becomes more painful. You see then the advantage of a perfect harmony of the secretions in cases of cancer. In cases where the urine is scanty, you would be astonished to find how much improvement may sometimes take place in the tumor from the employment of squill and digitalis in combination with the chrono-thermal medicines. Gentlemen, you must not suppose, like most of the vulgar, and not a few of the members of the profession, that cancer of the breast any more than the decomposition of other *external* parts of the body is necessarily a mortal disease. So long as you can keep up the general health to a certain mark, how can there be danger? The breast is not a vital organ; it is not like the lungs or heart necessary to the individual life,—it is a part superadded for the benefit of another generation. Many women formerly remarkable for large bosoms have, in the course of years, lost every appearance of breast by the slow but imperceptible process of interstitial absorption;—what inconvenience have these suffered in consequence? But for the paroxysms of pain, cancer would seldom terminate fatally at all; it is the pain that makes the danger, not the mere process of structural decomposition. Pain alone will wear out the strongest: relieve this, therefore, in every way you can, but avoid leeches and depletion, which I need not say are the readiest means, not only to exhaust the patient's strength, but to produce that extreme sensibility of nerve, or that intolerance of external impression, that converts the merest touch into the stab of a dagger. Strong people seldom complain of pain: weakly and emaciated persons only do so. Keep up your patient's health then by every means in your power, and they may live as many years with a cancer of the breast, as if they had never suffered from such a disease. Sir B. Brodie mentions the case of a lady who lived *twenty years* with Cancer, and died at last of an affection of the lungs, with which it had no necessary connexion.

What shall I say in regard to amputation of the breast? Will amputation harmonize the secretions? Will it improve the constitution in any way whatever? Those patients who, in the practice of others, have been induced to undergo operations have seldom had much cause to thank their surgeons,—the disease having, for the most part, reappeared at a future period in the *cicatrix* of the wounded part. Gentlemen, you have only to look at the pallid, bloated, or emaciated countenances of too many of the sufferers to be satisfied that something more must be done for them than a mere surgical operation,—a measure doubtful at the best in most cases, and fatal in not a few. Shiverings, heats and sweats, or diarrhœa, or dropsy,—these are the constitutional signs that tell you you have something more to do than to dissect away a diseased structure, which structure, so far from being the cause, was in reality but one feature of a great totality of infirmity. Many and many a breast have I known to be condemned as cancerous which has nevertheless been cured. That the knife may sometimes be advantageously employed I do not deny, but it should be the *exception*, not the rule; for the honourable and enlightened surgeon will admit how little it has served him in most cases beyond the mere purpose of temporary palliation. When you hear a man now-a-days, speaking of the advantage of early operating, you may fairly accuse him of ignorance, with which I regret to say interest, in this instance, may occasionally go hand in hand. The *price* of amputating a breast enters into the calculation of some surgeons.

If you search the records of medicine upon the subject of tumors, you will find that the medicinal agents by which these have been cured or diminished, come at last to the substances of greatest acknowledged efficacy in the treatment of ague. One practitioner (Carmichael) lauds *iron;* another (Alibert) speaks favourably of the *bark;* the natives of India prefer *arsenic:* while most practitioners have found *iodine* and *mercury* more or less serviceable in their treatment. Gentlemen, do you require to be told that these substances have all succeeded and failed in ague! Wonder not then that each has one day been lauded, another decried for every disease which has obtained a name, tumors of

all kinds among the number. We therefore conclude that tumor, like every other disease, is a development in the course of intermittent fever. That the false cartilages found in joints are the result of the ocasionally same disease I think the following case will be looked upon as a proof: —A soldier of the 30th foot, had a fit of ague every alternate day. Among his other complaints was a sudden occasional inability to use the elbow joint, an annoyance that came on and went off he knew not how. My assistant in the hospital supposed him to be shamming. One day, however, the patient directed my attention to a substance in the joint, which, upon examination, finding to be a false cartilage I immediately cut down upon and extracted. This was loose and unconnected;—a second cartilaginous substance which adhered by *a thread-like pedicle* to the surface of one of the bones I also removed. The arm got well, but the man continued subject to occasional ague fits, and in about a year afterwards I had again to perform a similar operation for him. From the *same* joint I extracted another cartilaginous substance, which was attended with some difficulty in the removal, as it adhered by a considerable part of its surface to the capsular ligament.

Mr. Lawrence in his observations on "Loose Cartilages in the Joints," says: "They have been found after death both in the elbow and joint of the lower jaw; but I do not know that they have ever been extirpated by surgical operation, *except from the knee joint.*" Mr. Lawrence's observations are to be found in the Medical Gazette for 1830; while my operations were performed in 1828-9, from which it would appear that I am the first medical man on record who extracted loose cartilages from the elbow. Has the operation been performed since?

At our next meeting we shall speak of the Senses and Passions, and explain what are meant by Animal Magnetism and Homœopathy.

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FALLACIES OF THE FACULTY.

LECTURE VII.

THE SENSES—ANIMAL MAGNETISM—THE PASSIONS—BATHS—EXERCISE—HOMŒOPATHY.

GENTLEMEN,

The CAUSES of DISEASE, we have already said and shown, can only affect the body through one or more of the various modifications of *nervous perception.* No disease can arise independent of this—no disease can be cured without it. Who ever heard of a corpse taking the Small-pox? or of a tumor or an ulcer being healed in a dead body? A dreamer or a German novelist might imagine such things. Even in the *living* subject; when nerves have been accidentally paralyzed, the most potent agents have not their usual influence over the parts which such nerves supply. If you divide the *pneumo-gastric* nerves of a living dog—nerves which, as their name imports, connect the *brain* with the *lungs* and *stomach*—arsenic will not produce its accustomed effect on either of these organs. Is not this one of many proofs that an external agent can only influence *internal* parts PREJUDICIALLY, at least, by means of its electric power over the nerves leading to them? Through the same *medium,* and in the same *manner,* do the greater number of REMEDIAL MEASURES exert their SALUTARY influence on the human frame. The brain and spinal column—the latter a prolongation of the former—are the grand centres upon which medicines act; and many are the avenues by which these centres may be approached. Through each of

THE FIVE SENSES

the brain may be either beneficially or banefully influenced. Indeed, take away these, where would be the joys, sorrows, and more than half the DISEASES of mankind? We shall first speak of SIGHT. The view of a varied and pleasant country may, of itself, improve the condition of

many invalids—while a gloomy situation has too often had the reverse effect. There are cases, nevertheless, in which pleasant objects only pain and distract the patient by their multiplicity or brightness. Night and darkness, in such circumstances, have afforded both mental and bodily tranquillity. The presence of a strong light affects certain people with headache; and there are persons to whom the first burst of sunshine is troublesome, on account of the fit of *sneezing* it excites. A flash of lightning has caused and cured the palsy. Laennec mentions the case of a gentleman who, when pursuing a journey on horseback, suddenly arrived at an extensive plain. The view of this apparently interminable waste affected him with such a sense of suffocation that he was forced to turn back. Finding himself relieved, he again attempted to proceed; but the return of the suffocative feeling forced him to abandon his journey.

The common effects of gazing from a great height are giddiness, dimness of sight, with a sense of sickness and terror; yet there are individuals who experience a gloomy joy upon such occasions; and some become seized with a feeling like what we suppose *inspiration* to be—a prophetic feeling, that leads them to the utterance and prediction of extravagant and impossible things. Others, again, under such circumstances, have an involuntary disposition to hurl themselves from the precipice upon which they stand. Sir Walter Scott, in his *Count Robert of Paris*, makes Ursel say, "Guard me, then, from myself, and save me from the reeling and insane desire which I feel to plunge myself in the abyss, to the edge of which you have guided me." Every kind of motion upon the body may affect the brain for good or for evil; and through the medium of the eye *novel* motion acts upon it sometimes very curiously. You have all experienced giddiness from a few rapid gyrations. Everything in the room then appears to the eye to turn round. If you look from the window of a coach in rapid motion, for any length of time, you will become dizzy. The same thing produces sickness with some. Many people become giddy, and even epileptic,

from looking for a length of time on a running stream; with others, this very *stream*-gazing induces a pleasurable reverie, or a disposition to sleep. Apply these facts to Animal Magnetism—compare them with the effects of the manipulations so called, and you will have little difficulty in arriving at a just estimation of that kind of imposture. What is animal magnetism? It consists in passing the hands up and down before the eyes of another slowly, and with a certain air of pomp and mystery; now moving them this way, now that; shaking them occasionally to appear the more important. You must, of course, assume a very imperturbable gravity and keep your eye firmly fixed upon the patient, in order to maintain your mental ascendancy. On no account must you allow your features to relax into a smile. If you perform your tricks slowly and silently in a dimly-lit chamber, you will be sure to make an impression. What impression?—Oh! as in the case of the *stream*-gazer, one person will become dreamy and entranced; another, sleepy; a third, figetty or convulsed. Who are the persons that, for the most part, submit themselves to this mummery? Dyspeptic men and hysteric women—weak, curious, credulous persons, whom you may move at any time by a straw or a feather. Hold up your finger to them and they will cry; depress it, and they will laugh! So far from being astonished at anything I hear of these people, I only wonder it has not killed some of them outright—poor fragile things! A few years ago I took it into my head to try this kind of humbug in a case of epilepsy. It certainly had the effect of keeping off the fit; but what hocus-pocus has not done that? I tried it lately in a case of cancer; but the lady got so fidgetty, I verily believe, if I had continued it longer, she would have become hysterical or convulsed! That effects remedial and the reverse may be obtained from this as from other modes of imposture, which we shall speak of in the course of this lecture, I am perfectly satisfied. And I admit, that they may be obtained without *collusion*, though certainly more readily by means of it. The *nature* of the

agency will be apparent when we come to consider the effects of charms and talismans.

The greater part of the influence of external impressions upon the eye, as upon other organs, depends upon novelty solely. Pomp and pageantry affect the actors and the spectators in exactly opposite ways. The Pope, in all the odour of his sanctity, would sometimes exchange places with the kneeling peasant. How differently the courtier feels in the presence of his Sovereign, from a person newly presented. The one, all coolness, looks for an opportunity of improving his advantages; the other's only care is not to make a fool of himself. I have often marked the different effect produced by a *punishment parade* upon the raw recruit and the old soldier. In a regiment of veterans, a thousand strong, not a man will move from his place—not a countenance will change its cast or hue, while lash follows lash, and the blood flows in streams from the back of the culprit. The same scene enacted before a body of newly enlisted lads of equal numerical strength, will alter the expression of every face; nay, a dozen or more will drop, some fainting some vomiting, some convulsed and epileptic. I knew a medical student who, the first time he saw an amputation, not only fainted, but lost his sight for nearly half-an-hour. The same student afterwards became celebrated for his manual dexterity, and the coolness and steadiness with which he performed his amputations. How awkward most persons feel when, for the first time, they experience a ship's motion at sea. The young sailor, like the young surgeon, soon gets cured of his squeamishness. The disposition to be sea-sick vanishes after a voyage or two. Now all this ought to convince you of the necessity of changing your remedies in disease. For what will produce a particular effect one day will not always do it another. With the body, as with the mind, *novelty* and surprise work wonders.

Do you require to be told that you can influence the whole corporeal motions through the organ of HEARING? I have stopped a fit of epilepsy by simply vociferating in the ear of the patient. The atoms of the brain, like the atoms of other parts, cannot do two things at once; they

cannot, at one and the same moment of time, maintain the state of arrest which constitutes *attention*, and the state of motion on which the epileptic convulsions depend. Produce cerebral attention in any way you please, and there can be no epilepsy. In this way a word may be as efficaceous as a medicine.

The influence of melody upon the diseases of mankind, was so fully believed by the ancients, that they made Apollo the god both of medicine and music; but sweet sounds, like other sweets, are not sweet to everybody. Nicano, Hippocrates tells us, swooned at the sound of a flute. What would he have done had he been obliged to sit out an opera? Many people become melancholy when they hear a harp played. The melancholy of Saul was assuaged by David's harping. You have all heard of the wonderful effects of the Ranz des Vaches—that air which, according to circumstances, may either rouse the Switzer to the combat, or stretch him hopeless and helpless upon the sick bed, from which he shall rise no more. Oh! these national airs have marvellous effects with many people! I have known them produce and cure almost every disease you can name; but their influence in this case greatly depends upon association. Captain Owen had more faith in an old song as a remedy for the tropical fever, from which his crew suffered, than in all the physic prescribed for them by the ship's surgeon. The singing of a long remembered stanza, he assures us would, in a minute, completely change the chances of the most desperate cases. Upon what apparently trifling things does life itself often turn!—

——————— "It may be a sound,
A *tone of music*, summer's eve or spring—
A flower, the wind, the ocean, which shall wound,
Striking the ELECTRIC CHAIN with which we are darkly bound."

How strangely some people are affected by SMELL. Who, that had never seen or experienced it, would believe that the odour of the rose could produce *fainting?* or that the heliotrope and the tuberose have made some men asthmatical? There are persons who cannot breathe the air of a room which contains ipecacuan, without suffer-

ing from asthma. The smell of musk, so grateful to many people, sickens some. An odour, in certain cases, may be as good a cordial as wine: every old woman knows the virtue of hartshorn or burnt feathers in fainting fits.

I am almost afraid to speak of TASTE, for, you know, *de gustibus non est disputandum.* Might not the Red Indian, when taunted for devouring vermin, retort upon the "Pale-face" for his mite-eating propensity? The Esquimaux, who rejects sugar with disgust esteems train-oil a luxury; but though he prefers a tallow candle to butter, he has as perfect a taste for whisky as any Irishman among us—that is, before Temperance Societies became the rage. How you would stare if you saw a man, in his senses, chewing quick-lime; yet I have seen some hundreds at a time doing that. I allude to the practice of the Asiatics, who first wrap up a little portion of lime in a betel-leaf, and chew both, as our sailors do tobacco. Now, that very tobacco-chewing has always seemed to me an odd taste, and I do not wonder that fine ladies have sickened at the sight of a *quid.* Was there ever such a fancy as that of the Chinese, who eat soup made of bird's-nests! Morbid in the first instance, such tastes, like other diseases, spread by imitation or contagion. In the West Indies, the negro is liable to a peculiar fever, called *mal d'estomac,* from the avidity with which he devours clay. His whole sensations then are doubtless more or less deranged. What extraordinary likings and longings ladies in the family way occasionally take! Some will eat cinders, some have a fancy for rats and mice, and some, like Frenchmen, take to frog-eating! I remember reading of a lady who paid fifty pounds for a bite of a handsome young baker's shoulder. The same lady went into hysterics because the poor fellow would not permit her to take another bite, at any price. If you smile, and look incredulous at this, what will you say to the following, which I vouch on my own credit. While I was studying at Paris, some fourteen or fifteen years ago, a woman was tried for decapitating a child. When asked her motive for a crime so horrible, she replied, "*l'envie d'une femme grosse.*"

Well now, I think we have had quite enough of Tastes—We shall, therefore, say something of TOUCH. Oh! you will tell me, not to bother you on that subject—no great good or ill can happen from a touch, you will say. But here you are mistaken; many curious and even dangerous affections may originate in touch simply, provided it be of a novel or unusual kind. Touch the white of the eye, however lightly, with your finger, or a feather, and you shall have pain that may last an hour. The application of either the one or the other to the throat or fauces may vomit you as effectually as tartar emetic or ipecacuan: every nurse knows that. A bristle introduced, in the softest manner, into the nose or ear, has thrown some people into fits. Then what extraordinary effects may sometimes follow the most painless touch of the bladder by a catheter or a bougie. I do not know what other medical men have seen, but I have again and again witnessed ague, epilepsy, faint, vomit and diarrhœa all from the mere introduction of the catheter or bougie. I have even traced rheumatism and eruptions to the same operation. You all know the effect of *tickling*. Now what is tickling but a succession of short touches? and see how wonderfully it affects most people! —oh, you may drive some men mad by it. It has been carried so far, in some cases, as to have produced convulsions and even death itself. Mr. Wardrop, on the other other hand, has found tickling efficacious in convulsive affections. I have already given you instances where the mere application of a ligature to the arm or leg has stopped fits of mania, epilepsy, &c. Now the influence of that apparently trifling application depends upon the cerebral *attention* which it excites through the double influence of sight and touch. As I hinted to you before, the lancet has often got the credit for the good effects produced by the bandage. Fear of the operation may also, on some occasions, have had its efficacy.

How many virtues were, at one time, attributed to a king's touch!—how many more are still believed to attach to the touch of relics—the bones, rags, and other rattletraps of saints! Priests and Princes, you have by turns

governed mankind—justly and well, sometimes—more frequently you have deluded and deceived them. If the credulity and weakness of the masses have, in most cases, been your strength, here at least the dupe has not always been a loser by the deceptions you practised. The emotions of faith and hope, which your mummery inspired, by exciting new revolutions in the matter of the brain, have assuredly alleviated and even cured, the sufferings of the sick. Strange infatuation of mankind,—with whom, where truth fails, imposture may succeed! In what does the adult differ from the infant? gullible man, who gives his gold for an echo, from the child who caresses its nurse when telling lies to please it? IGNORANCE in *degree* makes the only difference.

Gentlemen, let us now inquire into the manner in which the human frame may be influenced through the medium of

THE PASSIONS.

What are the Passions? Grief, Fear, and Joy—what are these?—are they entities or actions—the workings of demons *within*, or corporeal variations caused by impressions from *without*? Have not the Passions all something in common, some features or shades of feature so precisely the same as to form a bond of unity by which they may be all linked together? Are not the resemblances, in many instances, so strong that you could not tell one from another? A person is pale in the face, his lip quivers, his whole frame trembles or becomes convulsed. Is this fear, rage, love, or hate? May it not be the effect of a change of temperature simply? Criminals on the scaffold, when taunted by bystanders for *trembling*, have replied, "It is with *cold* then." "You are pale, M——, your *fears* betray you." "If I am pale, it is with *astonishment* at being accused of such a crime!" "You *blush*, L——, you are ashamed of yourself." "Pardon me, it is *your* audacity that brings the redness of *rage* to my cheek." You see, then, how like the passions are to each other, and how difficult it is to guess at them from mere appearance.

Like the various diseases of which we have had occasion to speak, the Mental Emotions, or rather the corporeal actions so called, have all been associated with particular organs and secretions. Their very names have changed with the changes in medical doctrine. Who among you would dream of placing *grief* in the liver? That the ancients did so is evident by the name they gave it—Melancholy literally signifies "black bile." Envy or spite we still call the "spleen," and when a person is enraged, we say "his *bile* is up." Europeans place courage and fear in the heart. The Persians and Arabs associate both with the liver: "White liver" is their term for a coward.

People often use the word *Temperament*, and professors of philosophy tell us there are four kinds. If a man is hasty or violent, his temperament is said to be *choleric* or bilious; if mentally depressed, *melancholic* or black-bilious; if of a joyful and happy turn of mind, he is of a *sanguineous*, or full-blooded temperament; if apathetic or listless, the temperament is then *phlegmatic*—a word somewhat difficult to translate, inasmuch as it originated in a fanciful phantom, which the ancients believed to be an element of the body, and which they termed "phlegm." Some add another temperament, which they call *leuco-phlegmatic*, or white phlegm. Pretty gibberish, Gentlemen!— mere sounds, in fact, invented by ignorance to cheat ignorance; or, in the words of Horne Tooke, "an exemplar of the subtle art of saving appearances and of discoursing deeply and learnedly on a subject with which we are perfectly unacquainted." It never occurred to the sophists of the schools that Man's mental dispositions, like his corporeal attributes, are every day altered by time and circumstance. Need I tell you, that disease has made the bravest man quake at his own shadow, and turned the most joyous person into a moody and moping wretch? When the doctrines of the Humoral School prevailed, the word temperament gave way to *humour*, and good and bad humour took the place of cheerful and sulky *temper*. We are in the daily habit of speaking of "the spirits." We say, "low spirits," and "high spirits;" which forms

of expression may be traced to the period when physicians were so ignorant as to suppose that the arteries, instead of carrying blood, contained "spirits," or "air." Gentlemen, this confusion of language has materially impeded our knowledge both of the *physical* and moral man. Locke must have felt this when he said, "Vague and insignificant forms of speech, and abuse of language, have so long passed for mysteries of science, and hard or misapplied words with little or no meaning have, by prescription, such a right to be mistaken for deep learning and height of speculation, that it will not be easy to persuade either those who speak or those who hear them, that they are but the covers of ignorance and hindrances of true knowledge."

"We cannot entertain a doubt (says Sir H. Davy) but that every change in our *sensations and ideas* must be accompanied with some *corresponding* change in the *organic matter* of the body." Through the medium of one or more of the five senses must some external circumstance first operate on the brain, so as to change the existing relations and revolutions of its atoms, before there can be what we term a *Passion.*

Whatever alters the cerebral atoms must alter the actions of every part of the body—some more, some less. According to the prominence and locality of one set of actions or another, do we, for the most part, name the passion. The jest that will make one man laugh may enrage another. What are the features common to all passions?—Tremor, change of temperature, change of secretion. Do not these constitute an ague-fit? Shakspeare, with his accustomed penetration, seized upon the analogy:—"This *ague-fit* of FEAR," he says, and he stretched it even to the world around him:—

> "Some say the EARTH was *fevered* and did *shake.*"

HATE and LOVE are equally remarkable for their ague-like changes. In the language of Hudibras:—

> "Love's but an *ague* that's *reversed,*
> The *hot-fit* takes the patient first."

The same may be said of RAGE, JOY, AND HOPE. I care not what be the nature of the passion—joy, grief,

or fear—the constitutional circle of actions is still the same; differing, where they do differ, in shade, place, and prominence solely—but in no greater degree than one fever differs from another. Moreover, there is no constitutional affection which these passions may not excite. In this respect, also, they resemble the Ague, that type of every disturbed state, whether of man the microcosm, or the globe he inhabits. We have already, to a certain extent, demonstrated the influence of particular passions in the production of certain diseases. We have further proved that the same morbid actions which we recognise under so many different names, when arising from a blow or a poison, may be equally the result of a mental impression: we have established their *absolute identity* by curing them with the same physical agents. If we have, in this manner, ameliorated or cured the subjects of disease originating in a mental impression—so also does the history of medicine present us with innumerable instances of the beneficial agency of these very passions in every kind of disorder, whatever may have been the nature of the primary cause.

FAITH, CONFIDENCE, ENTHUSIASM, HOPE, or rather the Causes of them, are as powerful agents in the cure of the sick as any remedies we possess. Not only, like bark or wine, do they often produce a salutary excitement or mild fever sufficient to prevent the access of the most malignant diseases—but, like these agents, they have actually arrested and cured such diseases after they had fairly and fully commenced.

A stone, or ring with a history real or supposed, a verse of the Koran or the Bible sewn in a piece of silk; these worn, now on one part of the body, now on another, have inspired a mental firmness and induced a corporeal steadiness which have enabled the wearer to defy the united influence of Epidemic and Contagion. If the Arabs have still their talismans and the Indians their amulets, the Western nations have not ceased to vaunt the cures and other miracles effected by their relics, their holy wells and holy water. When we boast of the success of a particular measure, we say it acted like a *Charm*.

What is a charm? Whence its origin? It is a corruption of the Latin word, *carmen*, a song or verse. In all times and in all countries, there have been men who have found their advantage in playing upon the ignorance of their fellow men; he that would appear wiser than another has always had recourse to some kind of imposture;—and as priest, poet, prophet and physician were often united in one person, it was not wonderful that such person should clothe his mummery and mysticism in verse. To be able to read or spell was, at one time, a mark of superior wisdom, and he who could do so, had only to mutter his *spell* to cure or kill. From the earliest antiquity, we find charms a part of medical practice. Homer, in his Odyssey, introduces the sons of Autolycus charming to *staunch blood*. The physicians of Egypt and India are to this day charmers. The north-men composed Rhunic rhymes to charm away disease. Indeed, with the Norwegians and Icelanders verse or song was supposed to be all-powerful. One of their poets thus expresses the belief of his time and country in this respect. "I know a song by which I can soften and *enchant* the arms of my enemies, and render their weapons harmless. I know a song which I need only to sing when men have loaded me with bonds; for the moment I sing it my chains fall in pieces, and I walk forth at liberty. I know a song useful to all the children of men; for as soon as hatred inflames them I sing it, and their hate ceases. I know a song of such virtue, that I can hush the winds with it, and subdue the storm to a breath." Such, Gentlemen, was the origin of Enchantment, or Incantation, terms borrowed from the Latin verb, *Canto*, I sing. With the Jews, the simple enunciation of their mystical word, *Abracalan*, was sufficient to inspire the confidence that baffled disease; nay, Quintus Severinus Simonicus vaunted his success in the cure of the hemitritic fever, by pronouncing mysteriously the word, *Abracadabra*, a phonic combination of his own invention! At this very hour, the Caffre rain-maker, the Cingalese devil-dancer, and the Copper Indian sorcerer, with their charms and chaunts, are enabled to work changes in the bodies of their several countrymen

that put the boasted science of the schoolmen to shame. That these act by inspiring Confidence simply may be seen from what took place in 1625, at the siege of Breda*. "That city, from a long siege, suffered all the miseries that fatigue, bad provisions and distress of mind could bring upon its inhabitants. Among other misfortunes, the scurvy made its appearance, and carried off great numbers. This, added to other calamities, induced the garrison to incline towards a surrender of the place, when the Prince of Orange, anxious to prevent its loss, and unable to relieve the garrison, contrived, however, to introduce letters to the men promising them the most speedy assistance. These were *accompanied with medicines* against the scurvy, *said to be of great price*, but of still greater efficacy; many more were to be sent them. The effects of the deceit were truly astonishing. Three small vials of medicine were given to each physician. It was publicly given out that *three or four drops* were sufficient to impart a *healing virtue* to a GALLON OF WATER. [Apply this fact to Homœopathy !] We now displayed our wonder-working balsams. Nor even were the commanders let into the secret of the cheat upon the soldiers. They flocked in crowds about us, every one soliciting that part may be reserved for his use. Cheerfulness again appears in every countenance, and an universal faith prevails in the sovereign virtues of the remedies. The effect of this delusion was truly astonishing; for many were quickly and perfectly recovered. *Such as had not moved their limbs for a month before*, were seen walking the streets with their limbs sound, straight and whole! They boasted of their cure by the Prince's remedy"—a mere sham medicine, Gentlemen! After this, do I require to caution you when you visit your patients not to put on a lugubrious or desponding look before them. Such conduct, on the part of a medical man, is unpardonable. Yet there are practitioners so base and sordid as to make it a part of their policy to represent the malady of every patient as dangerous. These find their profit in croaking, for it is a course of conduct that almost infallibly contributes to

* Ives' Journal, 1744.

[illegible] To God and their consciences I leave [illegible]

[illegible] disposed to question the de- [illegible] upon the sick, may read [illegible] with profit. There you [illegible] discouraged the seamen, [illegible] never failed to add new [illegible] for it usually killed [illegible] and confined those [illegible] capable of some kind [illegible]

[illegible] be done with the mere [illegible] Let me, therefore, coun- [illegible] look in the presence of [illegible] Lord Byron's words,

[illegible]

[illegible] Pathology and Dissecting-Room [illegible] dead bodies for [illegible] the wiser on the [illegible] of the living! Yet are [illegible] anatomy is the foun- [illegible] I have known a great many [illegible] but there are old women [illegible] a dead body, whom I would [illegible] any of these hair-split- [illegible] geographers, who will [illegible] I may say so, corporeal hills, [illegible] of the manners, [illegible] the animated masses [illegible] and departing from them. [illegible] creature presume here- [illegible] tell him to watch the [illegible] and ask him to explain [illegible] of injuries which heal [illegible] the persons of the victors, [illegible] even fatal, to the van-

quished! He might dissect their *nerves* as clean as he pleased, and never find out that the body of man may be either weakened or strengthened by his own mind.

The depressing power of GRIEF is familiar to every body; but there are cases where a reverse effect may take place from it—and Shakspeare, with his usual accuracy, explains the reason of this. Though I have already quoted the passage in illustration of another principle, I will again repeat it as an example of my present position.

> "In poison there is physic—and these news,
> Having been well, that would have made me sick,
> Being sick, have in some measure made me well;
> And as the wretch whose fever-weakened limbs,
> Like strengthless hinges buckle under life,
> Impatient of his fit, breaks like a fire
> Out of his keepers' arms, even so my limbs,
> *Weakened* with Grief, being now *enraged* with Grief,
> ARE THRICE THEMSELVES."

The strength imparted to the constitution in cases of this nature, has a relation to the novel atomic revolutions caused by *Desperation;* or that determination to act in an energetic manner, which so often comes upon a man in his extremity. Such reaction resembles the glow that succeeds the sudden shock of a cold shower-bath. There are persons whom a slow succession of petty misfortunes would worry to death; but who, on sudden and apparently overwhelming occasions, become heroes.

It will be readily admitted, by all who have profited by their experience of life, that one half the world live by taking advantage of the passions and prejudices of the other half. The parent of prejudice is Ignorance; yet there is no man so ignorant but he knows something which you may not know. The wisest judges have played the fool sometimes from ignorance; they have allowed themselves to be gulled by individuals of a class they despise. Poor, decrepid, ill-educated females, calling themselves Witches, have imposed upon the ablest and most learned men of a nation. Lord Bacon and Sir Mathew Hale believed in witchcraft. The latter sentenced to death wretches supposed to be convicted of it, and they were executed accordingly. Samuel Johnson was a believer in ghosts and

the second sight. Where is the country so enlightened that, upon some points, the wisest and best may not be mystified? If such a country exists, it must be England at the present moment. If there is a profession in which deception is never practised, it must be Medicine. Happy England! happy Medicine! where all is perfect and pure —where ignorance exists not—where the public are neither cheated by an echo nor led by a party for party interests. Here collegiate corruption is unknown, and corporate collusion is a mere name. Here we have no diplomas or certificates to buy—no reviewers to bribe—no Dr. Connollys—no Dr. James Johnsons—no humbug schools—no venal professors. Here, having no mote in our own medical eye, we can the better distinguish and pluck out that of our neighbours. Who will doubt our superiority in this respect, over all the other nations of the earth? Or who will question me in what that excellence principally consists? Scape-grace, sceptic, read Dr. Hawkins—read Dr. Bissett Hawkins' Continental Travels—and you will there find it recorded, that the brightest feature of British medicine—the most distinguishing point of excellence in English treatment—is the copious blood-letting we practise. "The *neglect* of copious blood-letting," Dr. Hawkins says, "is the great error of the continental Hospitals!" Let us laugh, then, at the do-little "medicine expectante" of the French, ridicule the do-nothing homœopathy of the Germans, and turn up our lip in derision at the counter-stimulant doctrine of the Italians. What are the greatest medical men of the Continent, in comparison with our own meanest apothecaries even—to say nothing of our leading surgeons and physicians—presidents and vice-presidents of learned societies! Only look at the number of scientific bodies to which these big-wigs belong—you will find their names enrolled in every literary and scientific institution throughout the country.* Amiable and respectable persons! worthy of the carriages in which you ride, and the arms you bear. You are gentlemen—friendly and disin-

* Astronomical — Botanical —Geological—Antiquarian— Royal.—Read their Yearly Transactions, and confess that one page of Shakspeare player, for practical wisdom, out-weights them all!

terested gentlemen. You owe your elevation to your own industry; you preserve your position by your incorruptible honesty; you recommend yourselves, and *each other*, neither by "letter" nor "affection," but upon the score of talent and integrity solely; you are "all honourable men." Unlike the "honourable members" of a certain honourable place, who *have been* purchased, *you*, the members of a liberal profession, are unpurchaseable! This, your colleges and coteries declare—this, the discriminating world believes and echoes. Who but the reptiles—the few that never think, never reflect—would answer, ALL IS NOT GOLD THAT GLITTERS!

In sober earnest, where is the man that has not his moral as well as his physical weakness? Upon that point, at least, we are all liable to be overreached. There we are imbecile as the infant. There we are placed as completely at the mercy of the Charlatan, as the child is at the disposal of the parent, whose mental ascendancy he acknowledges. Speak to the prattler of the "haunted chamber," his countenance instantly falls. With the adult, assume an air of mystery, mutter darkly and indefinitely, and mark how his brain will reel. Is he sane? he becomes your tool. Has he come to you in his sickness? you gull him and guide him at your pleasure. But how can you wonder at the effect of this kind of agency on individuals when you have seen a whole nation similarly hood-winked by a coterie of doctors? I allude to what was done when the Cholera first appeared in England. The influence of fear, in disposing to spread an epidemic, you know. The effect of confidence in strengthening the body against its attacks, you also know. What was the conduct of the College of Physicians when the Cholera broke out? Did they try to allay the alarm of the masses? did they endeavour to inspire them with confidence and hope that their bodies might be strengthened through their minds? No! they publicly, and by proclamation, declared the disease to be *Contagious;* without a particle of proof, or the shadow of a shade of evidence, they solemnly announced that, like the small-pox, it was communicable from man to man!

That was the signal to get up their Cholera Boards; and Cholera bulletins, forsooth, must be published. I had just then returned from India, where, though I had seen more Cholera cases than all the Fellows of the College put together, I never heard of Cholera Contagion; no, nor Cholera Boards. There, in the dark and barbaric East, the authorities, civil, military, and medical, acted with coolness and calmness: what they could not arrest they awaited with firmness and fortitude; they placed themselves and those committed to their care at the mercy of the great Disposer of events; while in England, enlightened England, under the influence of the leading medical men, the leading lawgivers introduced acts that disgrace the Statute Book, and permitted medical jobs to be got up that did anything but honour to the medical profession. A new tax was actually levied to defray the salaries of their Cholera Boards! The consequences of these measures might have been foreseen. Throughout the country a universal panic was spread, and a universal gloom prevailed. The rich shut themselves up in their houses, each in terror of his neighbour's touch; the middling classes suffered from the general stagnation which ensued in consequence, for every trade, but the Guinea trade, languished or stood still; and the poor, when taken ill—for the disease was chiefly confined to that class—were, by act of Parliament, dragged from their houses and hearths, and conveyed to Cholera Hospitals,—where, if they did not perish of the prostration induced by their removal, they had *salt* and *water* injected into their *veins* by the medical madmen in charge! Debarred the society of their nearest and dearest relations, and tortured in every possible way by their pedantic doctors, was it wonderful how few of these unfortunates escaped from the pest-houses in which they had been so inhumanly immured. All this the leading men of the country, peers, judges, and members of Parliament, saw and permitted, from a puerile dread of the phantom *contagion* which the ignorance or cupidity of the College of Physicians had conjured up. To what will not the

feeble minded submit when acted upon by intimidation, if

> "Even the wisest and the hardiest quail
> To any goblin hid behind a veil?"

Is not this a subject for deep reflection? To some it may suggest a feeling like shame. Let me speak of SHAME. Generally speaking, this is a depressing passion, and under its influence men *sometimes*, and women *daily*, commit suicide. I will give you an instance where it had the reverse effect. The Virgins of Miletus were seized with a mania that led them to believe self-destruction an act of heroism; and many, accordingly, destroyed themselves. Physic and argument having been alike ineffectually tried to prevent the spread of this fatal *rage*, the authorities ordered the bodies of the suicides to be dragged *naked* through the streets of the city. From that moment the mania ceased. But everything depends upon a contingency, whether a particular passion act as a depressant or a tonic in disease. In the case of shame, the past and the future make all the difference.

Some of you may, perhaps, feel inclined to remind me of the efficacy of Fear in the *cure* of diseases; but in this case the fear must neither be a dread of the disease or its event, but a dread of some contingent circumstance completely unconnected with it. Thus, Sir John Malcolm, in his History of Persia, tells us of a certain Hukeem who cured ague by the bastinado. In this case the Persian doctor availed himself of the double influence of fear and pain, neither of which were contingent upon the disease. The effect of terror in removing tooth-ache is familiar to most who have knocked at a dentist's door. The gout, too, has been cured and caused by every passion you can name. There does not pass a day but we hear of people being *frightened* into fits—epilepsy, for example; yet Boerhaave terrified away an epilepsy that had become endemic in a school, by threatening to burn with a red hot poker the first boy that should have another paroxysm. I have known asthma cured by rage, and also by grief; yet, if we may believe what we hear, people occasionally *choke* of both!

Few medical men will dispute the influence of a passion in the cure of Ague. Mention any mental impression, such as faith, fear, rage, or joy, as having succeeded in this affection, and they doubt it not; but superadd to the patient's state a palpable change of volume or structure, such as an enlarged gland or ulcer, and they smile in derision at the efficacy of a charm. Extremes in scepticism and credulity are equally diseases of the mind. The healthy brain is ever open to conviction, and he who can believe that the Obi-charm, or the magic of a monarch's touch, can so operate on the nervous system as to interrupt or avert the mutations of motion and temperature constituting an ague-fit, should pause before he denies their influence over an ulcer or a tumor, which can only be developed or removed by or with change of temperature. Indeed, from what we have already said, it is impossible for any individual to be the subject of any mental impression without experiencing a chill or a heat, a tremor or a spasm, with a greater or less change in the atomic relations of every organ and secretion.

Baron Alibert gives the case of a Parisian lady, who had a large wen in the neck—a *goitre*—which, from its deformity, occasioned her much annoyance. That tumor, which had resisted every variety of medical treatment, disappeared during the Reign of Terror—a period when this lady, like many others of her rank, experienced the greatest mental agony and suspense. The agony and suspense in that case referred to a contingency unconnected with her disease. The mere act of dwelling upon sickness will keep it up; while whatever withdraws the mind from it is beneficial. In my own experience, abscesses of considerable magnitude have been cured both by fear and joy. Few surgeons in much practice have been without the opportunity of satisfying themselves that purulent swellings may recede under the influence of fear. They have assured themselves of the presence of matter—they propose to open the tumor—the frightened patient begs another day, but on the morrow it has vanished.

Akin to Terror is DISGUST, or that feeling which a person naturally entertains when, for the first time, he

handles a toad or an asp. This passion has worked wonders in disease. The older physicians took advantage of it in their prescriptions; for they were very particular in their directions how to make broth of the flesh of puppies, vipers, snails, and millipedes. The celebrated Mohawk Chief, Joseph Brandt, while on a march, cured himself of a tertian ague by eating broth made from the flesh of a rattle-snake! In reality, the flesh of a rattle-snake is quite as innocuous and nearly as nutritious as the flesh of an eel; but when you come to think of the living animal and the venom of his fang, who among you could feed upon such fare without shuddering, shivering, shaking—without, in a word, experiencing the horrors, and horripulations of ague! Spider-web, soot, moss from the dead man's skull, the touch of a dead malefactor's hand, are at this very hour remedies with the English vulgar for many diseases. With the Romans the yet warm blood of the newly slain gladiator was esteemed for its virtues in epilepsy. The Hungarians, at this day, cure the same disorder by drinking the blood as it flows from the neck of the decapitated criminal. In the last century, a live toad hung round the neck was much esteemed, by the lower classes, for its efficacy in stopping bleeding at the nose. Now that people know that the toad is not venomous, it might not be so successful as it once was in this instance.

A consideration of the power by which the passions cure and cause diseases, affords at once the best refutation of medical error, and the most perfect test of medical truth. By this test, I am willing that my doctrines should stand or fall. Take the influence of *fear* simply—what disease has it not caused? —what has it not cured? The mode of its action, then, establishes beyond cavil not only the unity of disease, but the unity of action of remedy and cause. What does the proper treatment of all diseases come to at last, but to the common principle of *reversing* the existing motion and temperature of various parts of the body? Do this in a diseased body, and you have health — do the same in health, and you reproduce disease. Whatever will alter motion will cure or cause disease. This, then, is the mode in which all our remedies act. Just observe the effect of

BATHS.

In what disease have not baths been recommended?—and in what manner can they cure or ameliorate, but by change of temperature—by change of motion? Put your hand into ice-water—does it not shrink and become diminished in size? Place it in water as hot as you can bear—how it swells and enlarges. You see, then, that change of temperature necessarily implies change of motion;—and that change of motion produces change of temperature, you have only to run a certain distance to be satisfied; or you may save yourself the trouble, by looking out of your window in a winter morning, when you will see the hackney coachmen striking their breasts with their arms to warm themselves. Depend upon it, they would not do that for nothing.

I am often asked, what baths are safest, as if every thing by its fitness or unfitness is not safe, or the reverse. The value of all baths depends upon their fitness; and that, in many instances, can only be known by trial. It depends upon constitution, more than upon the name of a disease whether particular patients shall be benefitted by one bath or another. Generally speaking, when the skin is hot and dry, a cold bath will do good; and when chilly, a hot bath. But the reverse sometimes happens. For example, I have seen a shivering hypochondriac dash into the cold plunge bath, and come out, in a minute or two, perfectly cured of all his aches and whimsies. But in this case, everything depends upon the *glow* or *reaction*, which the bath produces; and that has as much to do with surprise or shock as with the temperature of the bath. I have seen a person, with a hot dry skin, go into a warm bath and come out just as refreshed as if he had taken a cold one. In that case, the perspiration which it excited must have been the principal means of relief.

So far as my own experience goes, I prefer the cold and tepid shower-baths, and the cold plunge-bath to any other; but there are cases in which these disagree, and I, therefore, occasionally order the warm or vapour bath instead.

In diseases termed "inflammatory," what measure so ready or so efficacious as to dash a few pitchers of cold water over the patient—*cold Affusion*, as it is called? When I served in the army, I cut short, in this manner, hundreds of inflammatory fevers—fevers that, in the higher ranks of society, and under the bleeding and starving systems, would have kept an apothecary and physician —to say nothing of nurses and cuppers—visiting the patient twice or thrice a day for a month. Do you wonder that prejudices should still continue to be artfully fostered against so *unprofitable* a mode of practice? When will the gullible public examine for themselves? That heaven only knows! but this I know, that there exists not on the surface of the globe a more inconsistent or incomprehensible nation than the English,—on the subject of medicine at least. They actually bribe their medical men to keep them ill! *In* their shops and *out* of their shops Englishmen generally enact two different characters. There they take advantage of their customers in every possible way; but the moment they leave their counters, they drop the knave, and become the dupe. The shopkeeper, who buys cheap and sells dear—the landowner, who keeps up the corn-laws by every possible sophistry, —the barrister and attorney, who rejoice and grow fat on the imperfections and mazes of the law—the clergyman, to whom gospel knowledge is nothing without his tythes —are all perfect lambs when they leave their respective vocations, each giving the others credit for a probity and disinterestedness in their particular line, which himself would laugh at as sheer weakness, were any body to practise in his own! With the most childish simplicity, we ask our doctor what he thinks of this practice, and what he thinks of the other—never for a moment dreaming that the man of medicine's answer, like the answer of every other person in business, will be sure to square with his own interests. Instead of using the *eyes* that God has given us, we shut them in the most determined manner, that our *ears* may be the more surely abused. "What a delightful person Dr. So-and-so is," we say; "he is so kind and

so anxious about me. I have the greatest faith in him." Just as if all that affected solicitude, and all that pretty manner of his were not a part and parcel of the good doctor's stock in trade. Silly, simple John Bull! why will you pin your faith to fallible or fallacious *authority*, when you may get the truth so easily by a little personal *examination!*—To be able to discriminate in the choice of a physician, and to guard against medical imposture, would not cost a person half the time, or anything like the trouble, of mastering the inflections of τυπτω verbero, or *Amo, amare!* Which kind of knowledge is of most use in life I leave to pedants and philosophers to settle between them. Meantime, I shall beg your attention to the subject of

EXERCISE.

The effects of mere motion upon the body are sometimes very surprising. Only think of horse exercise curing people of consumption! A case of this kind, you remember, I gave you, on the authority of Darwin. I knew a gentleman who was affected with habitual asthma, but who breathed freely when in his gig. I know, at this moment, another, afflicted with giddiness, who is immediately "himself again," when on horseback. A dropsical female, who came many miles to consult me, not only felt corporeally better when she got into the coach, but her kidneys acted so powerfully as to be a source of much inconvenience to her during the journey. This corporeal change she experienced every time she came to see me. The motion of the circular swing has cured mania and epilepsy. But what, as we have repeatedly shown, is good for one patient is bad for another. You will not, therefore, be astonished to find cases of all these various diseases, where aggravation may have been the result of horse exercise, and the other motions we have mentioned.

Exercise of the muscles, in any manner calculated to occupy the patient's whole attention, will often greatly alleviate every kind of chronic disease. Dr. Cheyne was not above taking a useful hint on this point from an Irish

charlatan. "This person," says Dr. Cheyne, "ordered his (epileptic) patients to walk, those who were not enfeebled, twelve, fifteen, or even twenty miles a day. They were to begin walking a moderate distance, and they were gradually to extend their walks, according to their ability. In some of the patients, a great improvement took place, both with respect to digestion and muscular strength; and this was so apparent in a short time, that ever since this luminary shone upon the metropolis of Ireland, most of our patients affected with epilepsy, have been with our advice peripatetics."

The poet Coleridge, while at Malta, was in the habit of attending much to those about him, and particularly those who were sent to Malta for pulmonary disease. "He frequently observed how much the invalid, at first landing, was relieved by the climate, and the stimulus of *change*, but when the *novelty* arising from that change had ceased, the monotonous sameness of the blue sky, accompanied by the summer heat of the clime, acted powerfully as a sedative, ending in speedy dissolution." Is not this a proof of the correctness of my previous observation, that in chronic disorder remedies require to be frequently changed?

The benefit to be derived from Travelling, often great in chronic disorders, is partly to be ascribed to the change of motion, and partly to change of air and scene. Like every mode of treatment presenting frequent novelty, travelling therefore offers many advantages to the invalid in every kind of chronic or habitual disease. How often, alas! do we find it recommended, as a last resource, under circumstances where it must inevitably hasten the fatal catastrophe. The breath that might otherwise have fanned the flame, now only contributes to its more rapid dissolution. How much the success of a measure depends upon time and season! I must say a fews words about

PLASTERS, BANDAGES, &c.

The beneficial influence obtained from all such local

applications depends upon the change of temperature they are capable of producing. Their results will vary with constitutions. Most patients, who suffer from chronic disease, will point to a particular spot as the locality where they are most incommoded with "cold chills." This is the point for the application of the galbanum or other "warm plaster." A plaster of this kind to the loins has enabled me to cure a host of diseases that had previously resisted every other mode of treatment. The same application to the chest, when the patient complained of chilliness in that particular part, has materially aided me in the treatment of many cases of phthisis. In both instances, where *heat* was the more general complaint, cold sponging has been followed by an equally beneficial effect.

How can you apply a *bandage* with any degree of tightness to any part of the body, without altering the motion of that part—without equally changing the temperature? In such cases you find ulcers and tumors benefitted, or the reverse, much in the same way as they may be daily seen in hospitals after the application of hot or cold water dressings. The ingredients of surgical ointments, blisters, lotions, &c.—what are they but combinations of the agents with which we combat fever? Their beneficial influence depends upon the change of motion and temperature which they produce by their electrical action on the nerves of the part to which they are directed.

Gentlemen, I shall employ what remains of our time today in a brief notice of the doctrines of Hahnemann, the founder of the Homœopathic School. His Pamphlet, entitled, "The Spirit of the Homœopathic Doctrine," commences thus:

"To know the *essence* of Diseases, and the hidden changes which they effect in the body, is beyond the reach of the human understanding."—Which proposition he contradicts by the following paragraph:

"It is necessary that our senses should be able clearly to discern what it is in each malady that must be *removed* in order to restore health, and that each medicine should express, in a distinct and appreciable manner, what it can

cure with certainty, before we can be in a condition to employ it against any disease whatever."

From this you perceive that Hahnemann looks upon disease as a "something to be removed," instead of a state to change; and as he uses the phrase, to "expel disease" in another part of his work, it is evident he does not know in what disorder consists. Again:

"The material substances of which the human organism is composed, no longer follow, in their living combination, the laws to which matter is subject in the state of non-life; and they acknowledge only the laws proper to vitality—they are then animated and living, as the whole is animated and living. In the organism reigns a fundamental power, indefinable yet every where dominant, which destroys every tendency in the constituent parts of the body to conform themselves to the laws of pressure, of concussion, of *vis inertiæ*, of fermentation, of putrefaction, &c., which subjects them exclusively to the wonderful laws of life, that is to say, maintains them in the state of sensibility and activity necessary to the conservation of the living whole—in a dynamic, almost spiritual state."

Gentlemen, what does all this amount to? To nothing more than this: that if you press the soft parts of the body, they will not yield to a resisting substance—that you cannot be shaken by concussion, or have the bone of the leg or arm broken by external agency—that you are in a dynamic state—a state "*almost spiritual!*" What is the meaning of the word *dynamic?* It signifies "moving power." That you can understand; but when our author, apparently dissatisfied with his own term, would further explain it by the words "almost spiritual," a phrase perfectly indefinite, you see he has only a vague conception that the various parts of the body are in motion. But that the material substances of the living frame do follow the laws to which *all matter* is subject, *under the particular circumstances in which they are placed,* is undoubted. The body obeys the law of gravitation, which, as you know, is only a part of the law of attraction. Amber, when rubbed, is in a different state from what it was before; it then at-

tracts silk, and the silk, by this attraction, becomes so changed in its state, as to be repulsed by the amber. When the various matters of the earth have become the matter of the body, then their state changes also; so that the chemical changes of their atoms become modified in the same way as the atoms of an unorganized body are influenced to motion or rest by the difference of temperature or motion of the bodies around it. When the magnet attracts iron, it does so, not contrary to the law of gravitation, but in conformity with the more comprehensive law of which gravitation is a part—namely, electricity or galvanism. But electricity, like the doctrine of *elective attraction*, is only a fragment of the great doctrine of LIFE; and what is life, but an expression for various actions and phenomena of matter, in almost all its conceivable states? Yet listen to Hahnemann: "The life of man, and its two conditions, health and sickness, cannot be explained by any of the principles which serve to explain other objects. Life cannot be compared to anything in the world except itself—no relation subsists between it and an hydraulic or other machine—a chemical operation—a decomposition and production of gas, or a galvanic battery. In a word, it resembles nothing which does not live. Human life, in no respect, obeys laws which are purely physical, which are of force only with organic substances." We apprehend, Gentleman, that the whole, or nearly the whole, of this statement is assumption, and if there be truth in nature, that this assumption is a fallacy. In the ossification of the skull, you have the most perfect exemplification of *carpentry*. The joints of the body embrace every principle of the *hinge*—the muscles, tendons, and bones are so many *ropes pulleys*, and *levers*—the lungs act in *bellows* fashion,—the viscera are containing *tubes*. Then, in regard to the vascular system, the heart and blood-vessels are to a tying great extent a *hydraulic apparatus*, as you may prove, an artery or compressing a vein; the blood, in the first instance, being arrested in its course from the left chamber of the heart; in the second, in its progress to the right side of it. What are assimilation, secretion, absorption,

the change of the matter of one organ into another—of the fluids into the solids, and vice versa, but *chemical operations*—and the whole nervous system, but the *galvanic* or *electric apparatus* by which these operations are effected? That the human body obeys laws purely physical, is still further exemplified by the fracture of a bone or the rupture of a tendon—and the reunion of both is the result of secretion and chemical attraction under the electric influence of the nerves supplying those parts. During childhood, if the great nerve of a limb becomes paralytic, the growth of that limb becomes arrested, not only in its breadth, but length. The nerves, then, are the moving powers, and if you cut or divide them, neither a broken bone nor a ruptured tendon can reunite, so as to become useful. And do we not see analogous effects taking place in every kind of matter under the influence of the galvanic wire? By that we produce the decomposition and recomposition of bodies—various changes of motion and temperature—of attraction and repulsion of atoms—which, if we break the chain of the wire's continuity, immediately cease to take place, but which recommence the moment the wires are again brought into contact. That a living man can in an oven defy a degree of heat that would broil a piece of dead flesh, is perfectly true; but to what is this owing, but to the greater power of attraction which the particles of his body maintain to themselves in their living than dead state. Nevertheless the degree of heat may be so raised, as to decompose portions even of the living body, and finally reduce the whole to a state incompatible with life. And may not the electric state of all bodies be similarly influenced and altered? How, then, can the phenomena embraced by the term LIFE be said to "resemble nothing which does not live?" They resemble everything of which our senses can take cognizance. "There is no agent or power in nature, says Hahnemann, capable of morbidly affecting man in health, which does not, at the same time, possess the power of curing certain morbid states." But, what, Gentlemen, is this but another mode of expressing Shakspeare's words: "In poison there is physic?"

"Now," continues Hahnemann, "since the power of curing a disease and that of producing a morbid affection in persons in health, are inseparable from each other in all medicines, and that these two powers proceed manifestly from *one and the same source*, that is to say, from the property which medicines have of modifying dynamically the state of man; and that consequently also, these cannot act on the diseased after any other inherent natural law than that which presides over their action on individuals in health; it follows from this, that the power of the medicine which cures the disease in the sick is the same as that which causes it to excite morbid symptoms in the healthy."

That medicines cure and kill by one and the same principle, we have already, we believe, sufficiently demonstrated; but "the property which medicines have of modifying dynamically the state of man," is only an expression that they possess *a moving principle*. This, we have shown, Shakspeare knew. The explanation of that principle lies in the galvanic or electric power, by which, through a nervous medium, they can disturb the existing temperature and motion of the organ over which their action manifests the greatest influence, evidenced by their effects both in health and disease;—and this proposition, I believe, I have been the first to make, and I shall demonstrate it more fully in the course of my next lecture.

"As soon," he proceeds, "as we have under our eyes the table of the particular morbid symptoms produced in a healthy man by different medicinal substances, it only remains to us to have recourse to pure experiments, which alone are capable of determining what are the medicinal symptoms (or the symptoms produced by the medicine in the healthy subject) which ALWAYS arrest and cure certain morbid symptoms (*i. e.* diseases) in a rapid and durable manner, in order to know beforehand which of those medicines, the particular symptoms of which have been studied, is the surest method of cure in each given case of disease."

This whole sentence is somewhat confused and parenthetical, but from it and other passages, it is evident that while Hahnemann obtained a glimpse of the principle upon which remedies act—namely, the unity of source of their power of affecting for good or for evil the motions of particular parts of the body, not only was he ignorant of the manner of their action, but also of the utter impossibility of predicating in any one case of disease, what remedy would certainly achieve amelioration, far less a cure. If there be a truth more sure than another in physic, it is this that until we have absolutely tried a medicinal agent in an individual case, we cannot possibly tell whether it be a remedy or an aggravant in that particular case. No! Gentlemen, the ague patient may come before you; but whether arsenic or bark, opium or prussic acid shall arrest his disease, you can no more predict than you can determine beforehand whether harsh or soft measures, or either, will reclaim a refractory child, or subdue an ungovernable steed. Trial and experience are your only guides. This much, however, you can in the majority of cases of any given disease predict, that such agents as have a generally definite power for good or for evil over definite parts of the body, are the class from which you are to expect most benefit in a disease of such parts—but which of them—the experience of that case itself can only tell you; for how can you know without such experience that opium will vomit, rhubarb excite epilepsy, or ipecacuan cause asthma in particular cases? which you all know they sometimes do. When you order cold bathing, can you tell beforehand whether your patient will come out all in a glow, happy and comfortable; or chilly and shivering, and not to be comforted? Till you can do this, you cannot possibly tell by what given means you are to achieve a cure in any given case of disease. So far the art of physic is and ever will, I fear, remain imperfect.

That the principle "*similia similibus curentur*" which Hahnemann assumes as his own discovery was known to medical men before his time, we have already sufficiently

shewn, and that it was even familiar to the vulgar in the time of Shakspeare we likewise proved by a quotation from that poet. The following passage, which he puts in the mouth of Benvolio in Romeo and Juliet, is another instance :—

> " Tut man! one fire burns out another's burning,
> One pain is lessened by another's anguish,
> Turn *giddy*, and be holped by *backward turning*,
> One desperate grief cures with another's languish;
> Take thou some new infection to thine eye,
> And the rank poison of the old will die."

To the same purpose you have in Hamlet :—

> " Diseases desperate grown,
> By desperate appliance are relieved."

What is all this but *similia similibus curentur ?*

Dr. Hahnemann is now a very old man, but, if I am correctly informed, the first trace of his notions is to be found in Hufeland's Journal for 1796. There, I believe, for the first time he *revived* as his own the principle *similia similibus*. Yet, strange to say, he adopted a motto on which neither he nor his followers act. Gentlemen, they say one thing and do another. While they declare their readiness to cure by powers having precisely the same action as the causes, how can they reconcile with that statement their practice of treating *grave* disease —disease proceeding from a grave agency by the *dissimilar* agency of infinitesmal physic! If grave disease could be *caused* by the millionth or decillionth part of a grain of our common medicinal substances, what apothecary's apprentice could possibly enjoy a day's health ?—and yet it is by such *doses*—if matter so minute as to be all but invisible, can be termed such—that diseases are to be cured! Where, then, is the *similarity* of remedy to cause in the Homœopathetic treatment ?

In his Organon, Hahnemann tells us, that almost all chronic diseases are the result of a morbific miasm, which he calls the *psoric*, or the itch principle, and this, he says,

and two other evil miasms, the *syphilitic* and the *scrofulous*, may be looked upon as the parents of all the diseases of man!—mere phantoms, Gentlemen, of an excited imagination—mere crotchets of a mind clouded with the ghosts and goblins of those nurseries for grown up children, —the German Universities. Of his utter ignorance of the true motions and changes of the organic matter of the body, whether in health or disease, and of the thousand morbific causes visible and invisible that daily occur in life, there could be no greater proof than this announcement:—You who are no longer in the dark have only to hold up the torch of truth to dash his day-dream to the dust.

When I first heard of the Homœopathic doctrine of infinitesmal physic, I felt tempted to believe that the whole was a weak invention of those enemies to medical truth, the medical reviewers, knowing as I do the trickery and misrepresentation in which these gentry indulge when acting in behalf of the professional tradesmen, whose mercenaries they are. His own volume has, however, undeceived me. His own Organon developes the number of shakes and rubs by which the *millionth* part of a grain of quinine may become one of the deadliest poisons, and the ten millionth part of a grain of opium, a medicine to cause you to sleep your last sleep! But Hahnemann is a disciple of Mesmer—and he tells you to watch the miracles effected by Animal Magnetism. Do that, he says, and you will no longer doubt the cures which may be achieved by infinitesmal physic. Now, so perfectly ready am I to believe all he or his own disciples may tell me upon this point, that it is a medical maxim of mine, "Any thing may do any thing, and anything may not do any thing," according to the ignorance and credulity of the patient, if it be a charm;—or according to the constitution and exigencies of the case, if it be a physical agent. In which light infinitesmal physic is to be viewed, you, Gentlemen, may decide at your leisure.

What but *faith* or a *fancy* to try could induce people to put themselves under the hands of a homœopathic practitioner? The influence of simple confidence on the

body we have proved by what took place at Breda in 1625. During the siege of that city, three or four drops of a hocus-pocus medicine were said to be sufficiently powerful to impart a healing virtue to a gallon of water! The thing was *believed*, and the sick immediately took up their beds and walked. To tell the sensible part of mankind that you can cure any disease with the millionth or decillionth part of a grain of opium, bark, or aconite, would only excite their ridicule, but you know how little will sometimes influence the minds of the multitude, who, being ignorant, are naturally weak and credulous. With these you have only to affect a superior knowledge of the visible and invisible world, speak confidently of the cures, real or supposed, that have been effected by your treatment, and talk mysteriously of the rubs and shakes by which you impart a magical or magnetic virtue to your infinitesmal physic. Should a doubt remain, hint at the wonders of Electricity or Galvanism, for a little mixture of truth will make your mummery go down better—just as a little apparent candour will make you more readily give credence to a calumny or a scandal. In both cases a complete want of principle is the chief element of success on the part of the impostor —and faith the weakness or strength of the dupe. Only get the latter to listen to you, and you may inoculate him with a fancy to try—that of itself implies faith. However small at first, it will be sure to increase by thinking and talking about the *new* method. A little opposition is a good thing sometimes—the patient gets heated up by it. If he has a tendency to improve, he will improve the faster—if he finds himself deceived, he will conceal the fact, as he would be sorry that others should not be as great fools as himself. Patients of the class who consult Homœopathic practitioners generally collect together, talk, discuss and theorize till they work themselves into a kind of fever—such fever, or *rage*, by exciting and animating them, will in many cases be infinitely more beneficial to their constitution, than the draughts and mixtures inflicted, usually not so much on account of the necessities of the patient as the needy

condition of the practitioner. Having once become partizans and disciples, they next find a pleasure in making converts. They have now what they had not previously—an object before them; and they work body and mind in the cause. Can you wonder that they should in many cases get well by the new mode of life to which they have taken? This, Gentlemen, is the secret of any success obtained in the course of the Homœopathic treatment. Like the French "medicine expectante," it is a system of placebo. What is new in it is not true; what is true is not new. Savage Landor says rightly, "most disputants drive by truth or over it." In the case of *similia similibus*, Hahnemann has done both—he adopts it as his motto, but practices on a principle the reverse. The doctrine *like cures like*, was so obvious as to be a popular axiom time immemorial—but it is only the minor of a major proposition, or a fragment of the great abstract law:—ANY GIVEN POWER MAY CAUSE, CURE, AGGRAVATE OR ALLEVIATE ANY GIVEN FORM OF DISEASE, ACCORDING TO ITS DOSE, DEGREE, AND THE PARTICULAR CONSTITUTION OF A PARTICULAR PATIENT. Time must also be considered, for there is a season for all things.

In our next lecture we shall consider the action of remedies generally.

LECTURE VIII. WILL APPEAR ON 1st. JULY.

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FALLACIES OF THE FACULTY.

LECTURE VIII.

PHYSIC AND POISON IDENTICAL—ACTION OF ALL MEDICINES ELECTRICAL—PARTICULAR REMEDIES, AND WHY THEY AFFECT PARTICULAR PARTS.

GENTLEMEN,

FROM the history of Medicine we learn, that after *Charms* came *Simples*. To the list of our remedial means, chance and experience successively added *Poisons*. "Wherefore," asked Pliny, "has our mother, the earth, brought forth so many deadly drugs, but, that when wearied with suffering, mankind might employ them for suicide?" If such was the opinion of the polished Roman, can you wonder at the belief of the rude Carib, and the still ruder Boschman, that poisons were sent them for the destruction of their national enemies. The Chronothermal system of physic sees the matter in another light. In common with the Christian creed it assumes, that the benificent Creator sent nothing into the world for the destruction of his creatures. By the *motion* of men's hands the Pyramids were produced. The same motion, acting *reversely*, might make them vanish from the plains where they have stood, the wonder of centuries. If the identical power, then, which may render a temple or a tower a heap of ruins, applied in another fashion to the materials composing it, first erected the fabric—why may not the *motive* power of a physical agent, which, wrongly administered, has destroyed the life of man, be employed, in a right direction, to preserve his existence?

"Philosophy, wisdom and liberty support each other;—he who *will not* reason is a bigot—he who *cannot* is a fool, and he who *dares not* is a slave!"* The base and selfish, of all ages, have ruled mankind by terror. By this the priest has trampled down reason; the despot, the

* Author of the *Academical Questions*.

rights of a people. To this passion the charlatan appeals, when he sneeringly speaks of particular substances as poisons, the better to distinguish them from his own nostrum of universal and absolute safety! What is the real meaning of the word poison? In its popular sense, it signifies anything in nature, that, in a comparatively small quantity, can shorten, or otherwise prove injurious to life. It is, then, a term of relation—a term, depending entirely on degree, volume, or scale. But what is there under heaven, when tried by this test, that may not become a poison? Food—fire—water—air—are these absolutely innocuous? The glutton dies of the meal that gorged him; is that a reason why we should never eat? The child is accidentally involved in the flames of a furnace; must we, on that account, deny ourselves the warmth of the winter-hearth?—Air has chilled, and water drowned; must we, therefore, abandon air and water?—Yet, this is the mode in which certain wiseacres *reason* on medicine! We must cease, according to these cat-witted creatures, to use opium medicinally—opium which, *in one degree*, has so often given relief to suffering; because the suicide, *in another*, has settled his earthly account with it! We must repudiate the curative effects of arsenic in Ague, because, with a *thousand times the quantity* adequate to that desirable end, the cut-throat and the poisoner have dispatched their victims by arsenic!—We must linger life away in the agonies of gout and rheumatism, instead of resorting to colchicum, which has so often cured both, because people have been accidentally destroyed by colchicum in a volume, *never given* for either rheumatism or gout! How many diseases has not prussic acid cured or alleviated; yet, we must abjure its benign influence in this way, forsooth, because love-sick maidens, and men, maddened by misfortune, have ended their lives with prussic acid, in a *quantity*, which nobody ever dreamt of giving *for any disease whatever!* By the same enlightened philosophy, we must not pat a child's head, because a blow might knock it down! Gentlemen, need I tell you, that the whole of these agents, in their *medicinal doses*, are as safe as rhubarb

in its medicinal dose; and safer than wine to some people, in the quantity usually taken at table. What, if even in their medicinal doses, they all, in common with everything in existence, occasionally produce the *temporary* inconvenience of disagreeable feeling, is that any reason why we should abandon their use, in the cure of diseases attended with feelings for the most part more sensibly disagreeable? What on earth, worth accomplishing, was ever accomplished without a similar risk?—We cannot cross a thoroughfare without the risk of being jostled—ergo, we must never cross a thoroughfare!

Gentlemen, *ubi virtus, ibi virus* is as true in most things as in medicine. Poison and physic are, in truth, ONE and IDENTICAL, for any earthly agent may become both, by turns, according as it *used* or *abused*. A German poet rightly observes—

> "Divide the thunder into single notes,
> And it is but a lullaby for children;
> But, pour it in one volume on the air,
> And the intensity makes heaven to shake."

The same rule holds good in physic. Everything depends on the scale or degree in which you apply a given substance to the body, and the particular circumstances and condition of the body at the time, whether such substance be a remedy or a poison. What is there that pertains to earth or air, that may not be converted to the use of man? If he, in his ignorance or depravity, turn a particular power to evil account instead of to good, shall blame be imputed to the Almighty, who bestowed it on him as a boon? Let babblers beware how they commit themselves in this matter;—let them fully understand, that when they decry any agent in nature as being, in the *abstract*, a dangerous medicine, or a poison, they not only arraign their God for his goodness, but expose, at the same time, their utter ignorance of his laws. Where men have not *examined*, surely, it were only policy to be silent. Do medical practitioners ever prate in this language of imbe-

cility? Too frequently, Gentlemen;—but, in their case, it generally proceeds less from a want of knowledge of the subject, than from a wish to disparage a professional competitor: sordid practitioners know, that there is no readier mode of influencing the sick, than by playing upon their fears. Not a week passes, but I am told by some patient—"Oh, I shewed your prescription to Dr. So-and-so, and he says it contains *poison!*"—In what respect? I ask;—only let Dr. So-and-so put down, in writing, that any medicine of mine is poisonous, *in the dose in which I have prescribed it,* and I shall have the pleasure of publishing his opinion to the world, that the wiser part of it, at least, may know how little he deserves the practice he enjoys. But that, as you may easily imagine, Dr. So-and-so has always been too cunning to do! To whisper away an honourable man's reputation is an easy thing—to write or reason it down unfairly, on paper, is more difficult.—Cautions—doubts—insinuations—these are the weapons by which you will be secretly supplanted in practice. Yes, Gentlemen, individuals who call themselves physicians, and who, without a scruple, would pour out a pint of your heart's blood at a time, will affect to start at the sixteenth part of a grain of strychnine, and shrug their shoulders, significantly, at two drops of prussic acid! "How easy to put such men down," I have been told. "You have only to ask them, if they ever knew an adult die of either medicine in these doses?—and dare them to say, that they have not, themselves, killed hundreds, by taking away a less quantity of blood than a pint!" Both of these I have, certainly, done—but, *cui bono?*—I have had reason and sense on my side, it is true!—but, what will either reason or sense avail him who stands, as I stand, *alone,* when his enemies have a party to back them, with the patient's prejudices and fears in their favour besides? The practitioners of whom I speak, are all so many links of an extensive chain of collusion;—they are all secretly bound to support and keep by each other;—they have signs and counter-signs, and a common story to tell. These men, like false dicers, do deeds "never dreamt of in your philosophy." At this moment, so far as medicine

and medical practice are concerned, the English public are very much in the same blissful condition of ignorance, as the Emperor Constantine was with the doings of his Guards.—"But still—but still," said Sebastes of Mytilene, "were the Emperor to discover—" "Ass!" replied Harpax; "he cannot discover, if he had all the eyes of Argus's tail! Here are *twelve* of us, sworn, according to the rules of our watch, to abide in the same story."—*Quentin Durward.*

If such, and similarly constituted, be the medical coteries of England, what honourable physician can hope to rise in his profession, until the eyes of the public are opened. Sir James M'Intosh was not the only man of talent who left it in disgust.—Locke, Crabbe, the present Master of the Rolls, and hundreds of others have done the same. Depend upon it, in these days, it is only the quack and the unprincipled practitioner who make fortunes by physic.

But, to return to medicines and their doses.—What substance in the Materia Medica would be worth a rush, if it were absolutely innocuous in every dose and degree? You all know, that rhubarb and magnesia may be given medicinally, to the extent of many grains;—but, may not both be so advanced in the scale of quantity, as to become equally deadly as strychnine or arsenic—were strychnine or arsenic to be taken in the usual dose of rhubarb or magnesia? May not our deadliest drugs, on the other hand, be so reduced in volume as to become as innocuous, to an adult, at least, as twenty grains of rhubarb would be to an infant? Surely, there is not one of you, whether sick or well, who would object to an infinitesmal dose of arsenic—the millionth or decillionth part of a grain, for example! Ah, these homœpathists! I question if they always keep to such doses; for, when a man makes up his own medicines, he may gull his patients as he pleases. But, be that as it may, there can be no surer test of imposture, than to be told you may take any medicine, in any quantity. Can food, itself, be thus taken? If it could, where would be the necessity of cautioning people about their diet? In truth, you can scarcely mention any

...e edible substance, that will agree, even in a moderate quantity, with all patients. One person cannot eat oysters, without becoming the subject of a rash. Another, the moment he eats poultry or veal, gets sick at stomach, though mutton and beef have no such effect on him. See, then, the truth of the old proverb "*What is one man's meat is another man's poison.*" Chesterfield says it is vulgar to quote proverbs; but Chesterfield was a lord, and a man of fashion, and, as I am only a doctor, and have no chance of being either, I prefer, with Cervantes, to strengthen my argument with their proverbial pith and point—not only because there is no proverb that is not true, but, because they are all sentences drawn from experience, the mother of the sciences.—*Don Quixote.*

In further illustration of this subject, I pass to the lower animals, and here again you will find that no earthly agent has been given us for evil, inasmuch as substances which, in comparatively small quantities, may poison one class of beings, are food to another, in a volume comparatively large. The sweet almond, for example, so nutritious to man, is deleterious to the fox, the dog, and domestic fowl. The hog may be poisoned by pepper, the parrot by parsley; stramonium, or thorn-apple, which when we prescribe it in physic, we do cautiously, and in small quantities, is greedily devoured by the pheasant with impunity; fowls enjoy the darnel—hogs, the deadly night-shade. The water hemlock, which is poison to all three, in common with man, is a most nutritious food to the stork, sheep, and goat. And the wolf is reported to take without inconvenience a quantity of arsenic, which would destroy the horse. You see then, how completely the word poison is a term of relation.

The infinity of substances which have been successfully applied to remedial purposes, whether derived from the animal, vegetable, or mineral kingdom, like the various *causes* of the diseases for which we administer them, will all, upon investigation, be found to have the most perfect unity in their mode of action. Their influence relates solely to their *motive power*, differing from each other,

where they do differ—merely in their capability of changing in this way, the atomic relations of a particular locality or tissue rather than another, but in no other way presenting a doubt or difficulty as to their *modus operandi.* What John Hunter said of poisons applies of course to remedies; they "take their place in the body as if allotted to them." Thus, Mercury and Iodine in whatever manner introduced into the system will still manifest their action, chiefly by changes in the motion of the glands and their secretions; while strychine and brucine on the other hand will as constantly produce their effects on the motive condition of the muscles. Through the medium of the *nerves* of a part, the greater number of medicinal substances, even when directly introduced into the veins, will produce their particular effects, good or bad, *according to circumstances,* upon that part. When thus administered, antimony will prove equally emetic, as when introduced into the stomach, rhubarb equally purgative, and opium as certainly soporific. Is not this the best of all proofs, how surely these agents were intended by the deity for the use of man?

If you ask a teacher of medicine, why opium sets you to sleep, his answer will be—"from its *narcotic* power." What can be more satisfactory? Nineteen out of twenty students at least are satisfied—they are delighted by being told in Greek, that it does set them to sleep! Why does rhubarb purge? you ask; "from its *cathartic* power," you will be told;—what does that mean? simply that it purges! Again you demand how does antimony vomit—again you get the Greek reply, "from its *emetic* power;" in plain English its vomits! Such is the mode in which the schoolmen juggle; instead of an answer they give you an echo! Had these logomachists—these word-mongers been as well acquainted with the *motions* of *living things* as with the inflections of *dead languages,* and the anatomy of *dead bodies* they would long ago have preferred *reasoning* to mystification. But for the last ten centuries at least, professors have been doing little else but splitting straws, blowing bubbles, and giving gravity to feathers! We shall

now endeavour to develope what their answers shew them to be ignorant of—the unity of action of all remedies.

Gentlemen, it is entirely owing to the *electrical power*, by which they influence the atomic motion of certain parts of the body, through the medium of the brain and nerves, that all agents act—all agents, with the exception of such as mechanically or chemically alter the tissue of the locality to which they are applied.* By this power, prussic acid relieves spasm—opium soothes—antimony vomits, and rhubarb purges. The primitive agency of all four then, is *one* and the *same*, namely the power of "wakening or controlling motion,"—of altering temperature;—their ultimate and apparently unlike results, only differing in the apparent dissimilarity of the functions of the organs which they respectively influence.

If it be asked in what manner opium or antimony can alter the temperature or motion of any organ through its nerves, I can only refer you to the changes which take place in chemistry, through the medium of the galvanic wire. Acted upon by this, bodies previously cold, become instantly heated, and the reverse; and they change their respective motions accordingly. Now, I care not what name be given to these phenomena—whether they be termed magnetic, galvanic, electric—for I believe with Mr. Faraday, that the variations of motive power so called, are simply modifications of a great common principle;—it is in this manner only, that every kind of change takes place in the human body. If you again demand how a given substance shall influence one part of the system,

* Arsenic or oxymuriate of mercury, applied in sufficient quantity to a *living* part, causes decomposition. The same quantity of either agent, when applied to any part of a *dead* body does not leave a stain even. Alcohol, which may cause mortification of the living stomach, is employed by anatomists to preserve the dead organ. Oxalic acid, so rapidly destructive of living organization, merely whitens dead matter. Some agents, however, such as the concentrated mineral acids decompose both dead and living matter, but in different ways. The poison of a cobra or rattlesnake, applied to a dead body, has no visible effect; how different in the case of the living! What but *Electrical* agency can explain these differences?

rather than another, I must again recur to chemistry. Have we not *elective affinity*—a disposition in bodies to combine with, and alter the motions of particular bodies, rather than others? It is in this *elective* manner that opium influences the nerves of sense, and antimony those of the stomach. But you may here again fairly ask, why does opium set one man to sleep, and keep another wakeful? I answer, why does amber when rubbed, attract a particular substance, and afterwards repel it? Is it not because it becomes thereby *electrically* changed? what eye can detect that change? It is because the state of brain of these individuals, is *electrically* opposite, that you have opposite results from opium. Opium like amber must therefore produce inverse motions—in one case *attraction*, in another *repulsion*, and that is the reason why mercury cures *iritis* in one individual, and causes it in another; why prussic acid can excite and relieve cramp; why terror has produced epilepsy, and frightened others into epileptic fits. The attraction and repulsion of the atoms of organs, then, not only account for organic increase, decrease, and decomposition, but for every variety of change which the body assumes, whether in health or disease. It is by attraction, that the fluid matter of a secretion becomes consistent and organised, again to be thrown off, by the same organ, in the fluid form of *secretion* by repulsion.

If this reasoning be true, Gentlemen, change of temperature, of itself, ought to produce, in living bodies, every constitutional and local change—every vitiation and variation, whether in gland or muscle, nerve or blood-vessel, which has ever formed the subject of medical investigation. That it can do so, might be proved from everything we know of life and the laws of life. What disease have not cold and heat produced?—What, in the shape of the warm and cold baths have they not cured? Look, again, at the effect of heat upon the egg. Even, when artificially applied, we see this apparently inert body converted, by thermal influence, into bone, skin and muscle, with their proper apparatus of blood-vessels and nerves! You will

tell me, the egg was predisposed to such changes. True, and change of temperature can only act upon all things, according to their original predisposition. Is not this the reason why a chill will produce rheumatism in one man, and consumption in another? Through thermal influence, the wool of the sheep and the feathers of the hen, may, in successive generations, be replaced with hair;—certain *viviparous* animals may even be made *oviparous*, in this manner. The aphis and the wood-louse, for example, may be made to bring forth either eggs or live young, at the pleasure of the experimenter, by simply varying the temperature in which he keeps them. Then, again, look at the effects of temperature upon the vegetable world! If, in the middle of winter, you introduce the branch of a vine which happens to grow by your window, into your warm chamber, and keep it there a few weeks, it will put forth leaves and blossoms. See, then, the wide and omnipotent influence of temperature on every living thing, from man, who only attains the maturity of his growth in the course of successive summers, to the gourd, that springs up and perishes in a night!

Having premised this much, we shall now, Gentlemen, enter upon a consideration of particular medicines. And, first, let us speak of such as have a general constitutional influence, with an affinity, more or less marked, for particular organs.—Of these, the most important are—

EMETICS.

When the various doctrines, which attributed all diseases to acrimonies, peccant humours, crudities, &c., prevailed in the schools, Emetics were among the principal remedies to which physicians very naturally resorted, as a preliminary means of cure. The beneficial effect observed to take place after vomiting, in the early stage of almost all disorders, was, of course, urged in confirmation of theories, which, even in the present day, are not without their influence on the minds of medical men. The primary action of emetics we hold to be *cerebral*, and the act of vomiting, not so much a cause of the other constitutional symptoms which accompany it, as one of many

effects produced by change in the atomic revolutions of the brain. Whatever will suddenly influence the brain, in any unusual or novel manner, by changing its temperature and atomic motion, must necessarily change the whole corporeal state, whether it be, at the time, in health or disease. Have we not this familiarly exemplified, in the motion which causes sea-sickness—in the sickness produced by the rotatory-chair, and in the morning vomitings of early pregnancy? Anything that can withdraw the brain's attention from the stomach, such as a passion, a blow on the head, loss of blood, or a division of the nerves that supply it, may produce vomiting. Experience every day shews us, that the shivering or shudder liable to be occasioned by one cause, may be averted or cut short by agents, which, under different circumstances, can of themselves produce shiverings, tremor, &c. It is thus that the emetic exerts its salutary influence in disease. No man can take a vomit, without every part of the body undergoing some change during its operation. He feels a creeping sensation in every part—a sensation, demonstrative of the rapid revolution and change of relation, of every corporeal atom. Under the influence of such an agency, *you may see* the reddened and swollen eye, or testis, become, in a few minutes, of nearly its natural appearance, — nay, a complete abatement of pain in either organ, may be an equally rapid result. Who, then, will tell me, that the same effect may not take place from the employment of an emetic, in what are termed inflammation of the lungs or bowels? Oh, "all experience is against it!" I have been told.—All experience!—whose experience?" I have asked; but I never got an answer, for nobody had ever tried! Gentlemen, Mr. Hume, of the 43d foot, has, in his military hospital, treated his pleuritic and enteritic patients in this manner, for the last THREE YEARS AND A HALF: during all that time he has not bled or leeched a patient, for any disease—he has used emetics instead—and his practice has been, beyond all precedent, successful. Now, that I call a *fact*—a fact worth all the hypothetical assumptions of all the doctors, whose

gains depend, not so much on speedy cure, as on protracted sickness! There is no part of the body that you may not influence by an emetic.

A medical officer, of the East India Company's service, sent for me at midnight. I heard his groans before I reached his chamber. Shortly after leaving a crowded theatre, he had imprudently taken his place on the top of one of the night coaches, where he had not been long seated before he was seized with repeated shivering, followed by fever, and exquisite pain in the back and loins—in medical phrase, *lumbago*. When I saw him he had all the symptoms which are termed, in the Schools, high inflammatory fever, and he complained of agonizing pain in his back. His wish was to be bled, but I prescribed an emetic instead, and this relieved him in the briefest space imaginable. From the moment he vomited, his back became easier, and in a few minutes he was quite free from pain—a result equally pleasing and astonishing to the patient, who, on a previous occasion, had been confined six weeks to bed with a similar attack, notwithstanding repeated bleedings, leechings, and blisters. Another patient lately under my care, experienced a like relief from the use of an emetic in nearly the same circumstances. In the case of the first gentleman, I followed up the emetic with hydrocyanic acid. In the case of the second, I prescribed quinine and sulphuric acid—the latter, my more general mode of treatment in acute disease. Cases, without number, could I give of the beneficial influence of this practice in acute ophthalmia, sore-throat, pleurisy, rheumatism, &c.—diseases which, under the usual or orthodox measures, would have kept the physician in attendance for weeks, and then, perhaps, have defied both his aid and his art. With the same practice I have had equal success, in the treatment of hæmorrhages, eruptive fevers, &c., and I might here give cases corroborative of my assertion, were I not borne out by many of the older writers, particularly Heberden and Parr, who found emetics, followed by bark, to be the best primary treatment of disorder generally.

John Hunter says, he has "seen buboes cured by a vomit, after suppuration had been considerably advanced," —and he has "known a large bubo, which was just ready to break, absorbed from a few days' sickness at sea." He attests the cure of "white-swelling" or knee-consumption by emetics—and the value of the same class of medicines in pulmonary consumption, has been strongly insisted upon by many writers. In physic, as in everything else, there is a fashion; but the great men of our day, notwithstanding all their assertions, would do well, in more instances than these, to imitate the practice of their forefathers.

The principal substances used as emetics, are antimony, ipecacuan, and zinc—but a great many others might be added, such as sulphate of copper, tobacco, &c., to say nothing of *luke-warm water*, which last, from its relation to *temperature*, will readily occur to you as the best exponent of the mode of action of all. There are individuals whom no known agent can vomit, and others, in whom the common emetics act always as purgatives. This you can not, of course, know before-hand; so that the experience of every individual case, is the only rule by which such case is to be treated.

PURGATIVES.

The action of an aperient upon the bowels, has often been made a powerful means of influencing diseased states, through the medium of the brain—but, like every other remedial agency, from ignorance of its mode of action, it has been too frequently converted by practitioners into a cause of disease and death. The physician who proceeds, day by day, to purge away "morbid secretions," "peccant humours," &c., is a mere humoralist, who neither knows the manner in which his medicines operate, nor understands the nature of the wonderful machine, whose disordered springs he pretends to rectify. Do not let me be understood to deprecate purgative medicines.—As a remedial means they are inferior to emetics;—when combined with these, they are amongst the best medicines

with which to commence the treatment of diseases generally,—that is, where the patient has not been previously reduced by protracted suffering.

It has been my fate to witness no inconsiderable amount of mischief induced by a mistaken perseverance in purgative measures. Will nothing open the eyes of gentlemen of the humoral school? Surely they will be staggered when told, that in an evil hour the exhibition of a purge has been followed by a paroxysm of the gout? Yet nothing is more true or better avouched. "Reasoning upon this simple fact," Dr. Parr says, "the *humoral* theory of gout is altogether untenable." And so is Dr. Holland's hypothesis of its being caused by "a morbid ingredient in the blood." When I say I have known fatal fevers produced by medicines of this class, many will be sceptical; but few will doubt their power to produce *Dysentery*, which, in the words of Cullen, is an "inward fever."—"A dose of rhubarb (says Dr. Thomson) has produced every symptom of epilepsy, and, in an instance within my own observation, the smallest dose of calomel has caused the most alarming syncope." Let us *use*, not abuse, purgative medicines!

MERCURY.

The frequency with which mercury and its preparation, *Calomel*, enter into medical prescription—its beneficial and baneful influence in the practice of our art, render a knowledge of the true action of this metal, and the proper mode of its exhibition, matters of no ordinary importance.

What are the forms of disorder in which mercury is supposed to be most useful? The records of the profession answer, fever, iritis, erysipelas, dysentery, rheumatism, cutaneous, osseous, and glandular disturbances. To the same records, I appeal for testimony to the truth of my statement, that it has too frequently produced those very maladies in all and every of their forms and variations. Its influence extends principally over the glandular and assimulative systems; it has consequently a great effect on secretion. I have known mercury in small doses cure

what is termed scrofula hundreds of times, yet according to Sir Charles Bell, and I can bear him out in the fact; when wrongly applied mercury has set up "a *scrofulous* diathesis in the very best constitutions." "I have seen a person," says Dr. Graves, "labouring under mercurial irritation, seized with *common fever*, which afterwards became *typhus*, and proved fatal in five days. Still you will hear persons say, that if you get a fever-patient under the influence of mercury, you will cure the disease, and that mercurial irritation will protect a man against fever. I have known *jaundice* to appear during a course of mercury"—jaundice, for which some say it is *specific!* When you hear a man talking of specifics you may well laugh at him!

The value of all medicines has more or less relation to the quantity prescribed. Upon this subject, I think it material to speak regarding mercury; for it is in the enormous doses which have been exhibited by certain pseudo-practitioners, certain writers on Infantile and Tropical disease, that this substance, instead of being a blessing to humanity, has recently become one of the chief agents in man's destruction!

You daily see medical men—men, who never reflect upon the effect of any medicine—prescribing four, five, and six grains of calomel to children—to infants! Can you wonder at the frightful number of deaths that take place under seven years of age? Look at the bills of infantile mortality; and if you consider the quantity of calomel that children take, you will assuredly be compelled to declare, not how *little* medicine has done for the prolongation of life—but how *much* it has done to shorten it! Oh! you may depend upon it, there is a great deal of mischief done by the profession; that is the reason why people go to the quacks and the Homœopathists. The last are the least mischievous, for—if they actually give their medicines in the ridiculous doses they pretend—they do little more than hocus their patients with words, while the quacks and the medical men kill them wholesale by physic—physic wrongly applied.

Many years have now passed since Mr. Abernethy first advocated the employment of mercury in moderate doses. More recent writers have demonstrated the value of calomel in doses so minute as the twelfth and even sixteenth part of a grain. Combined with equally minute quantities of quinine, I have been for years in the habit of prescribing it in such doses, in all diseases of children, and I have found it invaluable in most.

If, with such minute doses of mercury, then, the practitioner may obtain the most excellent effects, what shall we say to the exhibition of four and five grain doses of calomel to infants? What language can be sufficiently strong to denounce the equally daring practice of ordering scruple doses of the same powerful mercurial for adults? That individuals occasionally recover from serious disease, after the unsparing use of calomel in such doses, is no more an argument in favour of such a mode of treatment, than that many a man has been knocked down by a blow, and lived to laugh at a description of accident to which others have succumbed.—To reason in this manner is to argue that blows are good things.

In saying this *much* I do not mean to raise objections to calomel as a purgative—in which case, a larger dose is necessary. But how often do you see this mercurial given in enormous and repeated doses, with the view of correcting morbid secretions, which inquiry, might have satisfactorily traced to the previous maladministration of calomel itself. Calomel, like every other remedial means, is a medicine or a poison, according to the quantity of the agent, and its fitness or unfitness for the constitution of the patient. This last, as we have previously hinted, depends upon the electrical state of the individual body, and that can only be known by trial. You cannot tell that a green piece of steel is magnetic or not till you try; no more can you tell the electrical state of the living body. It is only by experience you can know it. Calomel then has no exclusive relation to nomenclature; yet you will hear practitioners say, "It is not proper for this disease, but it is proper for that;" "it is good for jaundice, but bad for consumption."

All this is mere scholastic folly, based upon "the baseless fabric" of a theory! There is no disease, however named, where the administration of mercury, in some of its preparations may not be advantageously employed or the reverse, according to particular doses and constitutions.

How is it that the oxymuriate of mercury, formerly so much extolled by physicians, is now so seldom prescribed? A more effective remedy for numerous forms of disease is scarcely to be found in the Materia Medica. I have more particularly experienced its valuable aid in the treatment of dropsy, dyspepsy, paralysis and eruptions.

Very analogous to mercury in its mode of action is

IODINE.

Its influence on glandular parts and consequently upon secretion is very remarkable. But, gentlemen, like every other remedial agent it cuts two ways—atomically *attracting* or lessening volume and secretion in one case, atomically *repelling* or increasing both in another—according to the electric state of the individual body for which it may be prescribed. Now, the fact that iodine can cause as well as cure glandular diseases is not known to the profession; at least, I have not seen it noticed in the course of my reading. It behoves me therefore to state that I have been frequently obliged to countermand its exhibition in the treatment of bronchocele and other enlarged glands from the obvious increase of these tumors under its use. In such cases, patients have told me they were not so well in themselves, that they had had shivering fits or had suffered from inward fever; for like mercury, iodine has also a general febrile effect upon the system, for good in one case, for evil in another. As regards my own practice, I have found quinine more generally successful in the treatment of glandular affections than iodine. In a case of *goitre* that resisted both, a very great diminution of the swelling took place after a short trial of arsenic. But here I may observe that a remedy which may be found to be generally well adapted to the treatment of a particular type of disorder in one locality may be found

to be as generally prejudicial when applied to the same type in another. This to a certain extent may account for the encomiums which individual medicines receive from the profession one day, and the contempt with which they are very often treated the next. With iodine I have cured osseous and cutaneous complaints; and I have also found it useful in the treatment of phthisis and dropsy.

LEAD.

The acetate of Lead is a valuable agent in good hands, and was long celebrated as a remedy for consumption. I have cured eruptions by it, eruptions that resisted every thing else I could think of. "One effect of the continued use of acetate of lead," says Dr. A. T. Thomson, "is the excitement of ptyalism (salivation,) but notwithstanding this effect it has been recommended by Mr. Daniels for the purpose of allaying violent salivation, in doses of ten grains to a scruple in conjunction with ten grains of compound powder of ipecacuan; how, (asks Dr. Thomson,) are these contending opinions to be reconciled?" How but by the rule that the power which can move one way, may move the other, according to the electrical condition of the individual brain. This question, coming from a professor of materia medica shows you how much professors have yet to learn about the action of medicines.

TAR—CREOSOTE.

From innumerable trials of Tar and its preparation Creosote, I am enabled to speak satisfactorily of the remedial power of both. In small doses, creosote produces a mild fever, often beneficial in dyspeptic and hysteric cases, though in some instances like every other agent in nature, it occasionally disagrees. I have been obliged sometimes to discontinue its use from the vomiting of which the patient complained after taking it, though where vomiting was a previous symptom, I have succeeded in stopping it by creosote. Generally speaking I have found creosote an excellent remedy in dropsy, rheumatism and cutaneous

disorders; I once cured with it a case of amaurotic blindness of both eyes, where the disease was of considerable standing. The remedy was pushed as high as twenty drops for a dose; I commenced with two drops.

The efficacy of tar-water in the treatment of all kinds of disease was the universal belief of the latter half of the last century. The celebrated Bishop Berkeley wrote a treatise which contributed greatly to bring it into fashion. "From my representing tar-water," he says, "as good for so many things, some perhaps may conclude it is good for nothing; but charity obligeth me to say what I know and what I think, howsoever it may be taken. Men may censure and object as they please, but I appeal to time and experiment: —effects misimputed—cases wrong told—circumstances overlooked; perhaps too prejudices and partialities against truth may for a time prevail and keep her at the bottom of her well, from whence nevertheless she emerges sooner or later and strikes the eyes of all who do not keep them shut." The Bishop sums up the catalogue of its virtues, by saying, "It is of admirable use in FEVERS."

SULPHUR

though now seldom used, except for diseases of the skin, was long extensively employed in physic. With the vulgar it is still a remedy for ague. Like creosote it produces a mild febrile effect which may be turned to account in numerous disorders especially in dyspepsia, hysteria, and also in rheumatism, which last I have often cured with it, after every other remedy usually employed for that distemper had successively failed. The most generally influential agent in rheumatism is

COLCHICUM, OR MEADOW SAFFRON,

the medicinal principal of which is an alkali, termed *veratria*, or veratrine, and an admirable medicine it is, when carefully and cautiously administered. Now colchicum, like sulphur has cured the ague; and its efficacy

in this case depends upon the mild febrile action, which like hope, or joy, it has the power of producing; this action, as we already stated, is *intermittent*. If it has relieved pain and swelling in many cases, so also can it produce both; a reason why you should watch its effects, for where it fails to improve, it commonly aggravates. Like all other medicinal agents, it is a *motive* power, and if it fail to move matter the right way, it must occasionally move it the wrong. The mildest remedial substance, when taken by a person in perfect health, if it act at all, must act prejudicially. What is the action of colchicum, in such cases? according to the journals of the day, pains of the joints and feet, were among the symptoms produced by it, when accidentally taken in poisonous quantities by previously healthy persons—the very pains for which we find it available in practice!

SQUILL, DIGITALIS.

Are physicians aware that both of these substances have the power of *suspending* as well as of increasing the secretion from the kidneys? They are often continued too long in dropsy, to the prejudice of the patient, from practitioners being ignorant of their double action. But in this respect they only harmonize with all known agents. The *electrical* state of the body, which cannot be known, but by an experience of their effects upon it—determines whether squill or digitalis prove aggravant or remedial.

STRAMONIUM OR THORNAPPLE

is used by the Asiatics, in their treatment of mania—a disease which it has produced. It can also produce eruptions of the skin, a fact which led me to try its effects in cutaneous disease. Combined with *belladonna*, I have cured some very obstinate eruptions with stramonium. I have also employed the same combination advantageously in the treatment of pulmonary consumption. The general action of both remedies in small doses, is mildly febrile. Their use sometimes produces a tempo-

rary dimness of sight, which goes off, when the remedies are stopped.

TOBACCO, LOBELIA INFLATA.

Tobacco is a valuable remedy, when properly prescribed, and it may be administered internally as well as externally. I have found its internal use in the shape of tincture, efficacious in dropsy and asthma. Heberden cured a case of epilepsy, by applying a cataplasm of tobacco to the pit of the stomach. The *lobelia inflata*, or American tobacco is a good diuretic, and has cured asthma. Like the common tobacco, it produces sickness, in large doses.

THE BALSAMS AND GUMS.

Copaiba, turpentine, and guaiac, powerfully influence mucous surfaces, in one case, increasing secretion—in another suspending it. They have all produced and cured rheumatism. With turpentine I have cured cases of Iritis, which resisted mercury and quinine. Copaiba in some constitutions produces a cuticular eruption so like small-pox, that even medical men have supposed it to be that disease. Others putting this rash down to Syphilis have gravely proceeded to ruin their patients' constitutions with mercury, to cure what they were pleased to call "secondary symptoms!"

CANTHARIDES OR SPANISH FLY.

This is principally used as a blister; but the tincture of Spanish fly is an admirable internal remedy for gleet and leucorrhæa, and it is also among our best diuretics; remember, however, it can produce strangury, an opposite effect. I am in the habit of combining it with quinine and prussic acid, in the treatment of dyspeptic cases, and I find it useful also in cuticular disease; though in the case of a gentleman—a colonel of the army—a blister to the side had twice the effect of blistering him all over!

THE EARTHS AND ALKALIS

have all particular effects upon the body, according to the mode and degree in which they are administered. Besides their constitutional influence, each has more or

less affinity to special organs. Lime and barytes influence the secretions of the stomach; soda and potash those of the lungs, kidney, and bladder—ammonia or hartshorn affects the salivary glands—each for good or for evil, according to its dose and fitness for particular constitutions. The earth called alum is a favourite with the common people, in the cure of ague. What is its mode of action? Its power of astringency or attraction simply—the same power by which it arrests the morbid increase of secretion, called leucorrhæa. How does it do that? By its attractive influence over the atoms of the spine and the nerves proceeding from the spine. Well, then, that is the way in which it cures the ague. The greater number of

THE ACIDS

have been usefully employed in medicine. Acetic acid or vinegar is an old remedy for hiccup, and might be efficacious in other spasmodic diseases. Dilute sulphuric acid has cured the ague, among other disorders. With dilute nitric acid, I have arrested and increased almost every secretion of the body, according to varying circumstances. For a gentleman who was affected with vertigo and tremor I prescribed dilute nitric acid, which cured him; his wife by mistake, took his medicine for her own, and in a few minutes afterwards she was affected with a tremor, that lasted for nearly an hour! You see as a general rule then, that whatever can move one way, can move the other.

Gentlemen, the medicines of which I have given you some account to day, are the principal symptomatic medicines which I employ in my own practice, combining or alternating them, as I have already stated, with the chrono-thermal remedies. But there are thousands of other agents, which may be usefully employed in this manner, and a great number are mentioned in our books of Materia Medica. What I have said on the action of remedies generally, will apply to all. At our next lecture, I shall give you some account of the principal chrono-thermal agents—and conclude the course, by a general summary of the chrono-thermal doctrine.

FALLACIES OF THE FACULTY.

LECTURE IX.

PRINCIPAL CHRONO-THERMAL REMEDIES—SUMMARY OF THE CHRONO-THERMAL DOCTRINE OF DISEASE.

GENTLEMEN,

We now come to consider the mode of action of the chrono-thermal agents—or those substances so generally effectual in prolonging that remission of symptom which we have proved beyond a question, is a law of all disease. Whatever be the nosological name of a distemper—ague, epilepsy or eruption—the physician will more surely accomplish his purpose of cure by taking advantage of this period of immunity than by any measures to which he may resort during the paroxysm. The more perfectly periodic the paroxysmal returns, the more amenable will the disease for the most part be to the chrono-thermal medicines; but however imperfect, irregular, or brief the remissions, there is no case of disorder that may not be beneficially influenced by these remedies—whether you alternate them with baths and emetics, or prescribe them in combination with such symptomatic medicines and local measures as the features of the case from their prominence or place may appear to demand. The celebrated Cullen, whose system of nosology you know still continues to enslave the medical schools of Europe, was no mean adept in the *practice* of physic. To the value of

THE PERUVIAN BARK,

as a remedial agent, he bears his unequivocal testimony: what does he say are the diseases in which *he* found it useful? Rheumatism, gout, scrofula, scurvy, dysentery, gangrene, diseases of the bones, small-pox, convulsions, hysteria, hypochondria, hæmorrhages! Here then is a pretty large association of apparently different diseases all cured or relieved by a single substance! Does that prove

unity of morbid motion or not? does it shew unity or diversity of motive power, in the remedial agent? What better evidence of the absurdity of his own nosological system? a system that, so far from explaining the perfect continuity that pervades the chain of all morbid motions, separated the links so widely asunder as to make the student believe them to be so many distinct and unlike disorders, each of which forsooth required a separate treatise to understand it! What a beautiful piece of work for the quacks! what an admirable method of darkening the world—that bad men might the better pursue their game of imposture!

An accomplished French physician, Baron Alibert, speaks thus of the bark and its influence in disease, "I have been able to pursue and appreciate the salutary results of the employment of this substance in cancerous affections, in scrofulous tumors of the glands, according to the recommendation of Forsyth, in many cutaneous diseases and principally in lepra, elephantiasis and in certain cases of jaundice, arising from diminished tone in the secretary organs of the bile—in the alterations affecting the osseous system, such as ricketts, spina bifida, &c. With the bark we may also advantageously combat certain lesions of the nervous system, such as epilepsy, hypochondria, hysteria, &c. Many authors recommend it in hooping cough, and the various convulsive coughs. No remedy, according to them, is so efficacious in strengthening the organs of respiration, and in preventing the state of debility induced in the animal economy by the contractile and reiterated movement of the lungs. The most part of those who employ it in like cases are, nevertheless, of opinion, that the administration of it is imprudent without some previous preparation, according to the particular stage of disease. These practitioners [influenced doubtless by their theory of a humour in the blood] would in some sort, mitigate the ferocity of the paroxysms by sweeteners and temperants — often even by evacuants, such as emetics and bleedings. To prevent irritation, they wait until the strength has been absolutely struck down.

But the celebrated Murray differs from them altogether on this point. In his opinion, the bark is equally adapted to the cure of convulsive and periodic coughs as to the cure of intermittent fevers. He witnessed an epidemic in which these maladies were efficaciously met by this powerful remedy from the commencement. He has therefore PROVED that there is no advantage in retarding its administration; *and that to permit, in the first place, so great a waste of the vital powers, only renders the symptoms more rebellious, and their consequences more fatal!"—New Elements of Medicine.*

Murray was right, Gentlemen, whatever the present generation of medical men may think or say to the contrary. Oh! that the disciples of Malthus knew how admirably their master's system has been carried out by the great body of English practitioners! what encomiums would they not heap upon the schools and halls to whose regiments of lancers and leechers the world is so indebted for keeping down a surplus population!

Seriously, Gentlemen, there is no greater error than the present sanguinary practice; for whatever reduces the vitality of the whole must more surely confirm the weakness of a part, and thus more certainly quicken and perpetuate the habit of paroxysmal return. How different the results of chrono-thermal treatment! I know no disease, however named or caused, setting aside lock jaw and hydrophobia, which I have not cured by the bark, or rather I should say by its salt, the sulphate of quinine. The only preparatory measure to which I now resort is a cold bath, an emetic, or emetic and purge in combination. Blood-letting in none of its forms do I ever order. Who will tell me that this treatment is not good in the experience of others? For the pockets of many it may not be good, but for the health of the patient it is a practice that may compensate for a more flashy theory—a more dazzling philosophy.

Let not the world suppose, however, that possessed of a remedy so powerful, and, so far as nomenclature is concerned, one so *universally* applicable as the bark, the

physician has an infallible elixir—a remedy adapted to all constitutions. The most perfect ague-fit within my own remembrance, appeared to me to be the effect of two grains of quinine, which I prescribed for an asthmatic patient. Dr. Thomson mentions the case of a patient of his, in whom sulphate of quinine brought on an attack of asthma: "When he was getting well, after seven or eight days, I again," he says, "began the sulphate of quinine, and the same attack was the result." A lady, after taking it, became subject to intermittent fainting-fits. Now, some would be glad to lay hold of this as a reason why you should never use quinine. But the smell of the rose has produced fainting fits—the smell of ipecacuan asthma. Ought we, therefore, never to smell a rose, or keep ipecacuan in our houses? What agent in nature is absolutely innocuous? —rhubarb, in a very minute dose, always produces convulsions with some people—must we, therefore, never prescribe rhubarb? When quinine disagrees, the common complaints are tremor, faintness, head-ache, vertigo, nervousness, cramps and "all-overishness." Ratier, in his Hospital Reports, among its deleterious effects, mentions "nervous agitations," which, I fancy, might be as well translated "shivering fits,"—or—what say you to ague, Gentlemen? Oh! you may depend upon it, whatever can correct a morbid motion may cause it! My common dose of quinine for an adult is two grains of the sulphate, with an excess of acid —but in one case, a case of hypochondria, I found it decidedly beneficial in a dose of fifteen grains. I once knew *eight* grains produce delirious fever: when proceeding from other causes, I have cured delirious fever by quinine. Like many other medicines, the bark is termed by writers on Materia Medica, a *tonic*. All medicines are tonics, when they improve the health of the patient; but when, on the contrary, weakness or nervousness is the result of using them, who will say, that in that case, they are anything but debilitant? Bark, like an emetic or a purge, may cause both one and the other. To go on then, day after day, prescribing this substance, and what are termed "strengtheners," without manifest amelioration, or with

positive retrogression, is not giving a course of "tonics," but a succession of exhausting or debilitating agents. It is to prescribe a name for a name!

What, then, is the mode of operation of the bark, when its action proves salutary? Simply this:—it produces a new, but more subdued circle of motions throughout the body, though still a veritable *Fever;* which fever, by engaging the atomic attention in a new manner, suspends or confuses the constitutional memory, that leads to habit or return. Such memory French writers term "mémoire machinale." It is by this, that all the motions of health are periodically reproduced—and, by the same law, all morbid motions take on a habit of return. Whatever will put the brain on a new course of action or thought, will confuse this memory. It is in this manner that hope, joy, faith and enthusiasm act. What are these passions but mild fevers?—and, as no two fevers can affect the body at one time, inasmuch as no given atom can move in opposite directions at the same moment—these fevers, however mild in themselves, are sufficiently powerful, in many cases, to avert the return of the most dangerous morbid motions.—Like the fever of pregnancy, they may cure or arrest every kind of disease you can name, from tooth-ache to pulmonary consumption. Like the same fever, they *have produced* all!—according to constitutional predisposition.

The next chrono-thermal medicine of which we shall speak, is—

PRUSSIC ACID.

"Diluted prussic acid," says Majendie, "is employed with success, in all cases of morbid irritability (weakness?) of the pulmonary organs. It may be advantageously used in the treatment of nervous and chronic coughs, asthma and hooping-cough; and in the palliative treatment of pulmonary consumption; indeed, a great number of observations induce the belief, that it may effect *a cure* in the early stage of the *latter disease.* In

England it has been administered, with success, in dyspepsia, and also in hectic cough sympathetic of some other affection. [Why sympathetic of another affection? When a man's health is wrong *throughout*, some prominent symptom is seized upon, and considered to be cause of all the others!] Dr. Elliotson, both in hospital and private practice, has frequently employed medicinal prussic acid, prepared after the manner of Vauquelin. He has recorded more than forty cases of dyspepsia, with or without vomiting, and accompanied with considerable pain in the epigastric region, and with *pyrosis* (water-brash), which were cured by this acid. The same physician quotes a case of colica pictonum (spasm of the colon), in which Dr. Prout gave the acid, and procured instantaneous relief. Dr. Elliotson also administered hydrocyanic acid, in a great number of pectoral affections; and has almost invariably succeeded in allaying the troublesome cough. [Why will people use this word "invariably?"—what agent in the Materia Medica acts invariably in the same manner? —such a medicine would be, indeed, a *specific!* but that we shall never discover!] Applied externally in lotions, in different diseases of the skin, it has not, in Dr. Elliotson's practice, produced any decided effect. Dr. Thomson, however, asserts that he has employed it in lotions with constant success, [here, again, constant success!] in diminishing the itching and the heat so annoying in cutaneous diseases, and has cured several species of herpes."

"M. J. Bouchenel has published an interesting memoir on the employment of prussic acid in the treatment of chronic pulmonary catarrh. He mentions four cases in which this remedy proved effectual. He concludes by urging that prussic acid, when given in a small dose, is not more inconvenient than an ordinary cough mixture. M. Bouchenel has also employed prussic acid in a case of consumption, but he only succeeded in allaying the cough for a time, which leads him to doubt the fact of its having really effected the cure of confirmed consumption. *I do, however, assert and maintain,* (says Majendie,) *that with prussic*

acid I have CURED *individuals, having all the symptoms of incipient* PHTHISIS; *and even those in a more advanced stage.*"

"In Italy, the medicinal hydrocyanic acid has been used to allay excessive irritability of the womb, even in cases of cancer." "Professor Brera extols its happy effects in pneumonia; he recommends it also in rheumatic cases, and as an anthelmintic. Since this professor has employed it in diseases of the heart, Dr. Macleod has administered it in the same diseases. He has found it allay nervous palpitations, especially those which seemed to depend on derangement of the digestive organs. [How common this error of accusing one symptom of being the cause of another!] He has also employed it in some cases of aneurism of the heart. Dr. Frisch, of Nybourg in Denmark, has allayed the intolerable pain caused by cancer of the breast, which had resisted all the antispasmodics, by washing the ulcerated surface with diluted prussic acid. He has also successfully employed the remedy in several cases of phthisis. Dr. Guérin, of Mamers, has obtained beneficial results from its employment in two cases of brain fever." *Extracted from* MAGENDIE'S FORMULARY.

So much for the experience of others;—let me now add a few observations of my own in favour of the prussic acid. Combined with the tincture of *lobelia inflata,* it is one of the most effectual remedies for asthma, with which I am acquainted. The same combination has enabled me to cure spasmodic stricture of the urethra; and, generally speaking, I have obtained successful results from the administration of prussic-acid in cramp and spasm wherever developed. In the low, habitual fevers, whether misnamed dyspepsia, hysteria, or hypochondria, I have found it particularly valuable. I have also experienced its curative influence in the treatment of dropsy; more especially when complicated with difficult breathing.

In hemiplegia, I have found it more successful than strychnia. I may again mention that it is my custom, in the treatment of DISORDER generally, to combine some universal power, such as quinine, hydrocyanic acid, or arsenic,

with another power, possessing marked local influence. Thus, one or more of these may be advantageously combined with iodine, in glandular and skin affections,—with colchicum or guaiac in rheumatism—squill or digitalis in dropsy—cantharides or copaiba in leucorrhæa and gleet—with squill in catarrh—with purgatives where costiveness is a symptom; and so on in like manner, according to the most prominent feature of a case. Combined in this way with tincture of ginger, cardamoms, &c., I have found prussic acid extremely valuable in the treatment of flatulency and acidity of the stomach. In all these disorders, however, this and all other remedies will be found to be advantageous only in so far as they contribute to *improve the temperature*, and, consequently, the circulation of the subjects of them. Your patients, when obtaining their beneficial effects, will tell you, "I have not had those heats and chills which used to trouble me,"—or, "my hands and feet are not so cold or so burning as formerly." One of the best proofs of the modus operandi of prussic acid is the fact, that if you poison a certain number of rabbits with it—say a dozen, and pour cold water in a stream over six of them, these six will recover, while all the others will die. This has been done over and over again with the same result.

We have seen that prussic acid may be successfully employed in the most obstinate agues; yet, I remember the case of an Irish barrister, who, from the same medicine, experienced severe shivering and chilliness, with cramp, pain of the stomach, and slight difficulty of breathing; the very symptoms, you will remark, Gentlemen, for which it is so often available in practice! The electric condition of the *cerebrum* of patients, determines whether a given remedy shall produce attractive or repulsive motions; and this, we have repeatedly stated, can only be known by trial. From such trial, no greater harm than a little temporary inconvenience can take place, when prussic acid disagrees, if prescribed and watched by a judicious physician. Rhubarb or magnesia may do the same, for, like prussic acid, both act electrically.

These, like the bark, may be advantageously employed, as we have already stated, in *prolonging the remission* in every form of disease. The agency of opium appears to be, in the first place, principally confined to the nerves belonging to the five senses. With these we associate *memory*—and as every part of the body has, through the brain, a power of remembrance, whatever will confuse or suspend the action of the senses, will often equally suspend and confuse memory, and consequently conduce to the suspension or interruption of any habitual or periodic action of any part of the body. While minute portions of opium heighten the general perceptive powers, large doses diminish them. But a large dose, after all, is only a relative term—for the quantity that would poison a horse, may be a moderate dose to the habitual opium eater!

In addition to the beneficial effect of opium in diseases admitted on all hands to be purely nervous, I have found it more particularly useful in dropsy. Administered at that particular period of the day when patients have confessed to amelioration of their feelings generally, it has, in my experience, been frequently followed by a copious flow of urine after every kind of diuretic had completely failed. Indeed, I do not know a form of disease that has not in some stages been benefitted by the exhibition of opium. By giving it in a large dose during the remission, I have kept many consumptive patients alive for months, and several for years, whose existence must assuredly have been shortened but for the beneficial influence of this drug. There are persons whom—

> "Not poppy, nor mandagora,
> Nor all the drowsy syrups of the world"

would medicine into slumber—but with whom cold affusion would instantly produce that effect. Behold again, how much all things depend on temperature! With some people opium acts like ipecacuan—who then can tell what may be the effect of any remedy till it is tried? It is only impostors who *never fail!*

Travellers, who have witnessed its effects in the East,

mention tremor, fever, dropsy, delirium, and restlessness as the consequences of the habitual use of opium. It has, nevertheless, contributed to the cure of all these symptoms when produced by other causes. In practice we find it give repose in one case and preclude all sleep in another. Like alcohol, mercury, &c., it may under certain circumstances, relieve the symptoms it has itself produced. It has caused mania and cured it.

ALCOHOL—WINE, &C.,

can act upon the body, beneficially or the reverse, in no other manner than by changing the existing temperature of the brain. If a glass of brandy has arrested the ague fit and its shudder, the army surgeon will bear testimony to the "horrors" and tremblings which the abuse of strong liquors too frequently induces in the previously healthy. Are not the chill, the shiver, the fever-fit, the epileptic, asthmatic, icteric, strictural and other spasmodic paroxysms daily produced by potation? How often have we known dropsy brought on by gin-drinking;—yet is not gin daily prescribed with the best effect for the dropsical? See how differently alcohol affects different men!—One it renders joyful or gentle—another sullen and morose—in a third it gives rise to wit, while a fourth under its influence loses the wit he previously possessed. I remember the case of a man of the 1st Foot who grew mighty religious and took to psalm-singing every time he got drunk. But this spurious kind of godliness, as you might have expected, generally evaporated with the fumes of his liquor. That excess of religious feeling or veneration (as the Phrenologists call it) does, however, depend upon the temperature of some cerebral part, there cannot be a doubt; and that it takes place by fits Shakspeare well knew, for he makes one of Clarence's murderers say:

"—— I hope this holy humour of mine will change; it was wont to hold but while one would tell twenty."

Wine will make the brave man timid and lachrymose—the coward capable of actions, the mere thought of which, in his sober moments, would have inspired him with terror.

One man will first show the effects of drunkenness in his speech—another in his diminished powers of prehension—some individuals will not betray the influence it has obtained over them until they try to walk; their limbs may then fail them, though neither hand nor tongue show any signs of inebriety. Now all this is done by the change of temperature which wine induces on various parts of the cerebrum of particular individuals. It throws them into a state of *fever*; and the same phenomena may be witnessed in the course of fevers produced by cold or a blow. Dr. Jenner, in describing the effects of excessive cold on himself, says, "I had the same sensations as if I had drank a considerable quantity of wine or brandy, and my spirits rose in proportion to this sensation. I felt, as if it were, like one intoxicated, and could not forbear singing, &c."—*Baron's Life of Jenner.*

Take the converse of this—A man shall get as drunk as possible, and immediately become sober under the influence of a cold shower, or plunge bath. Does not this unity of result prove unity of mode of action? We prove then by every possible manner, that the effect of wine, whether for good or for evil, like that of every other power in nature, relates to the influence it exerts over the temperature of one or more portions of the brain.

MUSK, VALERIAN, CAMPHOR, ASSAFŒTIDA,

are all highly valuable in ague. But for its expense, musk ought to be more extensively used in the practice of medicine. For myself, I place it in the same rank with quinine and arsenic in the treatment of what are termed the purely nervous affections. It is generally recommended in books to begin with ten grains;—in my hands a much smaller dose has been attended with the best effects in numerous cases. But a great deal depends upon the purity of the drug. I lately succeeded with musk in a case of intermittent squint, which successively resisted quinine, arsenic, prussic acid, and iron.

A married lady who always became the subject of epi-

lepsy when pregnant, but had no fits under other circumstances, consulted me in her case: I tried every remedy I could think of without any advantage whatever; I then gave her musk, which at once stopped the fits. The dose in this case was four grains.

We have constant disputes whether a particular remedy be stimulant or sedative. Opium, musk, and prussic acid, have by turns become the subject of discussion. One theorist will take one side, another another, and each will bring you facts of equal cogency. Both are right and both are wrong. To reconcile this seeming paradox, we have only to observe that all remedies are either stimulant or sedative according to the dose and the constitution of the patient.

STRYCHNIA

can both interrupt, and produce fever. In an experiment upon a tetanic horse, a watery solution of *nux vomica* —the well-known source of the strychnia—produced, when injected into the veins, a shivering fit of some duration. I have, nevertheless, found the sulphate of strychnia of great service in obstinate agues, and in many chronic diseases in which chilliness, vertigo, and hallucination or phantasy were symptoms. In the case of an amaurotic female for whom I successfully prescribed sulphate of strychnia, the remedy deprived her, for about an hour, of the use of her limbs. The recovery of her sight, under its exhibition, amply compensated for this temporary accident. I have found it confuse the vision in a similar manner when prescribed for muscular palsies. In the treatment of epilepsy and many other spasmodic affections, this substance may be advantageously combined with the sulphate of quinine. I have, notwithstanding this, on several occasions, been obliged to intermit its use, from the pains of which the patients complained while taking it;—and this led me to make trial of the remedy in rheumatism, which, in some instances, it cured.

SILVER.

A consideration of the occasional beneficial influence of Nitrate of Silver in epilepsy, led me to try its effects in other disorders of the spasmodic kind, such as hooping-cough, asthma, cramp, &c., and I am glad to have it in my power to bear testimony to its very great value in all of these affections.—It is a powerful Chronothermal medicine—and like every medicine of this class, can produce the diseases it can cure.

I have already said that tremor, spasm, palsy, differ but in degree. It will not be surprising, then, to find, that in all these disorders, silver may be advantageously substituted for bark, prussic acid, &c. While engaged in prosecuting my researches upon the merits and demerits of silver, I found it to be one of the most powerful diuretics in the Materia Medica; a circumstance not altogether unobserved by the older authors, particularly Boerhaave, who was accustomed to prescribe it with nitre in dropsy. It has, nevertheless, the power to suspend the urinary secretion. There is an affection to which young females are remarkably subject—a periodic pain of the side—or *stitch*. This disorder has been maltreated under a variety of names, according to the notions entertained by attending practitioners, as to its origin and nature. If gentlemen would only take the trouble to ask the patient whether the affected side be colder or hotter than natural, I do not think they would be so forward, as they usually are, to order leeches and cupping-glasses. In ninety cases out of a hundred, the sufferer will tell you that that side is always chilly! This at least might convince them *inflammation* is not the "head and front of offending." Such pain is the result of spasm of one or more of the intercostal muscles—which pain when the patient is told to inspire will assuredly increase. Beware of adding to it by blood-letting! In numerous cases it will yield to half-grain doses of nitrate of silver—failing which, prussic acid, quinine, or arsenic, may be successively tried; and to one or other of these, it will prove, for the most part,

amenable. In *pain of stomach after eating*—also a disease of the spasmodic kind—I have found silver particularly valuable. In all the varieties of cough and catarrh, I have derived advantage from its employment; and I am sure it has, in my hands, contributed to the cure of indubitable phthisis. Let it be at the same time remembered that I do not exclusively rely upon this medicine in any one form of disease;—for unless it be sulphur for *psora* I do not know a specific in physic!

There is a disorder to which aged individuals and persons who have suffered much from mental anxiety are liable—a disposition to *faint* and *fall*—often mistaken, and fatally mistreated, under the name of "tendency to apoplexy." The employment of silver in this affection has, in my practice, been very generally successful. I have found it also decidedly advantageous in vertigo, and in many cases of mental confusion.

Nitrate of silver has a great influence over the spine and spinal nerves; for patients sometimes complain of lumbago, sciatica and rheumatic pains while taking it. I have occasionally known it produce shivering and fainty sensations, but these inconveniences were merely temporary, going off upon the discontinuance of the medicine. It has cured them all when produced by other causes. Writers mention blueness of skin as an occasional effect of nitrate of silver; now though I have myself prescribed it many thousand times, I never witnessed such an effect, or the slightest appearance of it. Who then would reject a valuable remedy, because its *abuse* has produced, in rare instances, a peculiar colour of skin—seeing that *every* remedy, if improperly applied, may occasion the far greater calamity of death itself!

COPPER,

like silver, is now seldom used but in epilepsy. Fordyce, nevertheless, thought so highly of it as a remedy for ague, that he ranked it with the peruvian bark. Boerhaave, Brown and others esteemed it for its diuretic power; and accordingly they prescribed it in dropsy.

In the same disease, and in asthma I have had reason to speak well of it, and I can also bear testimony to its salutary influence in chronic disentery—a form of disease so frequent in the East Indies, that while serving there I had many opportunities of testing Dr. Elliotson's favourable opinion of its value. That it can produce all these disorders is equally true; for where it has been taken in poisonous doses, "it excites (according to Parr) a pain in the stomach, and griping in the bowels, tenesmus, ulceration, bloody stools, difficult breathing and contraction of the limbs." An universal or partial shiver, will be found to precede or accompany all these symptoms. Copper was a favourite *febrifuge* with the older practitioners.

IRON

is a very old remedy for ague—perhaps the oldest. Stahl particularly dilates upon its virtues in this affection. Much of the efficacy of a medicine depends upon the constitution of the season and climate—much upon the constitution of the patient. This metal, like every other remedy, has consequently had its supporters and detractors in every form of disease. It is, at present, one of the principal remedies for Hysteria, and other female disorders—disorders which we have already shewn are mere variations of remittent fever.

The water in which hot iron had been quenched, used to be prescribed by the ancient physicians as a *bath* for gout and palsy. In skin diseases and cancer, ricketts, epilepsy, urethral stricture, &c., iron has been vaunted by numerous modern practitioners. The ancients recommended it in diarrhæa, dysentery, dropsy, hectic, vertigo, and headache. Now, in all these affections it has served me much like other powers—ameliorating or aggravating the condition of the patient, according to peculiarity of constitution.

Some pseudo-scientific physicians have amused themselves with witticisms at my expense, on the subject of iron. Finding it in some of my prescriptions for

Phthisis, they have accused me of mistaking this disease for dyspepsia. How long will men deceive themselves with such puerile absurdity? When will they learn that the human body, in disease, as well as in health, is a TOTALITY,—not a thing to be mapped into parts and portions, like a field of rice or corn! Let them take a lesson from St. Paul, who in his first epistle to the Corinthians, has these remarkable words:—"And whether one member suffer, all the members suffer with it; or one member be honoured, all the members rejoice with it."

ARSENIC.

The successful employment of arsenic by the natives of India, first, I believe, induced European practitioners to try its effects in ague and also in diseases of the skin. The happy effects of this medicine were found not to be confined to these disorders. Not only has its judicious administration been attended with success in epilepsy, and numerous other forms of convulsive disorder, but it has been advantageously employed in the treatment of structural change. Dr. Parr, in his Dictionary, published in 1809, speaking of the beneficial result of its exhibition in open cancer says, "We have seen, from its use, an extensive sore filled with the most healthy granulations, the complexion become clear, the appetite improved, and the general health increased. Unfortunately," he adds, "these good effects have not been permanent. By increasing the dose, we have gained a little more, but at last, every advantage was apparently lost." I have already stated, as a general observation, that few remedies will long preserve their beneficial influence over chronic disease, the old habit of return being stronger than the new habit induced by the medicine. If this be true in the case of simple and uncomplicated nervous disorder, what right have we to expect a more favourable result, from the employment of any medicine, in a structural disorder of so chronic a kind as cancer?

The numerous panaceæ which have, from time to time, been vaunted as cures for cancer, will, as we have already

stated, be found, on examination, to be principally composed of remedies proper for intermittent fever;—iron, opium, bark, arsenic. In this, as in every other chronic disease, what will be beneficial one day may fail or aggravate the next. Try arsenic in cancer or consumption, not on one but many patients, and change it for iron, quinine, and prussic acid, according as you find the action of one or other, more or less permanently beneficial, and I feel assured you will not have to thank some of your teachers for the *incurable* notions with which they have imbued your mind on the subject of these diseases.

Like every other remedy, arsenic has its advantages and disadvantages. Enquire of miners, exposed to the fumes of this metal, and you will find that fever, tremor, spasm, palsy, and ulcer, compose almost the sum total of their sufferings. In the *Edinburgh Medical and Surgical Journal*, there is a relation of five cases of poisoning by arsenic. Among the symptoms mentioned by the narrator, Mr. Marshall, were vomiting, pain, and burning of the stomach, thirst, crural and abdominal spasms, purgings, head-ache, dimness of sight, intolerance of light, palpitation, *chills* and *flushes*, epilepsy; all of which proceeding from other causes, I have successfully treated by arsenic. The first case of epilepsy, in which I ever derived benefit from any remedy, was cured by this metal; the disease was principally brought on by hard drinking, and the fit came on at a particular hour, every alternate night. Now it is worthy of remark, that after an attempt at suicide by arsenic, detailed by Dr. Roget, periodic epilepsy was among the effects produced. The subject of it, a girl of nineteen, had also chills and heats, which if you please, you may call *Intermittent* or *Remittent Fever*, or any thing else you fancy—for it is not my custom to quarrel about names!

As a remedy for cutaneous disease, I have every reason to speak highly of arsenic, even when complicated with much structural change. Some cases in which it had very great effect, I will detail to you. The subjects of

them were sepoys or native soldiers, who had suffered in the Rangoon War, from climate, aggravated by depraved or defective food, and the usual privations of men in the field. These patients were under my care for a fortnight only; and to that period the treatment refers. All of them, be it remembered, had had the "fever."

Case 1.—Jan Khan, havildar, had tuberculous thickening of the skin of the legs and arms, resembling a partial elephantiasis. His nose was enormously enlarged, and his whole appearance unhealthy. He eat and slept badly, and his tongue was foul and clouded. After the operation of an emetic, the liquor arsenicalis was administered in six drops thrice a day. At the end of a fortnight, the alteration in his general appearance was wonderful. The nose had then become nearly of the natural size, and the disease of the skin had gradually lessened. He then slept and eat well, and expressed himself much pleased, with the improvement he had received from his medicine.

Case 2.—Daud Khan, sepoy, had pains of the bones and joints, white patches all over his skin, and an irritable ulcer of the scrotum, from which a fungus, about the size of a chesnut sprung up. He complained also of a burning sensation in his feet. When I first saw him, he was so weak he could not rise from the floor without assistance, and his countenance indicated extreme wretchedness and debility. Having detached the fungus, with a pair of scissors, the lunar caustic was applied, and arsenic administered *ut supra*. In a week, there was great amendment of the sore. The patient since then rapidly gained ground; of the pains of the bones he no longer complained, and the eruptions on the skin gradually disappeared; the ulcer at the same time closed, and I expected he would soon be fit for duty.

Case 3.—Setarrum, sepoy, had large sores of the leg, sloughy, ill-conditioned, and spreading in different directions. He had, also, cuticular eruptions, like the last-mentioned patient; and his appearance and strength though not so wretched, were yet sufficiently miserable.

Pure nitric acid was applied, to the whole surface of the sores, and a poultice ordered. The arsenic was given as above. On the separation of the sloughs, the leg was supported by Baynton's bandage. The ulcers gradually healed—the eruptions disappeared—and the patient regained complete health and strength.

Case 4.—Subryah, sepoy, had had his leg thrice amputated, the last time in the middle of the thigh, but the bone had been left with only a covering of skin. The stump was in an ulcerous state when I first saw him—and the probe, upon being passed through one of the ulcers, found the bone carious and denuded as far as it could reach. The patient's health was altogether wrong, not one function being properly performed. It was proposed to amputate at the hip-joint, as it was not believed that any other treatment could do good. To this step however he would not submit. A trial was given to arsenic, and the sores, beyond expectation, at the end of a fortnight had *nearly healed.* The patient then slept and eat well, and looked comparatively strong and healthy.

Case 5.—Vencatasawmy, sepoy, had ring-worm of the skin, and an ill looking ulcer over the sternum—which bone was perfectly carious;—the probe could be passed through it to the depth of three inches in the direction of the mediastinum. The patient was weak and irritable. and could neither eat nor sleep; his pulse was rapid and small, and his appearance altogether miserable. Arsenic was resorted to as before. The ring-worm under its use, disappeared—the sore began to look clean—the probe, when he went from my hands, only passed to the depth of an inch, and the patient's health was rapidly improving.

These cases were intrusted to my care by Dr. Gibb, of the Madras Medical Staff, while he himself was on sick leave, and were afterwards reported by him, to the Medical Board of that Presidency.

Do I now require to tell you, Gentlemen, the principle upon which arsenic proved so efficacious in the treatment of these various structural changes? It acted simply by its

power of controlling REMITTENT FEVER, under a chronic form of which these unfortunate sepoys were all suffering—the structural changes being mere features or developments of the general derangement.

The fact, Gentlemen, is now established—indisputably established, even by the cases of the schoolmen themselves, that *fear*, or any other given passion, *bark* or any other given medicine, have cured a host of maladies, which the authors of nosological systems not only note as separate and distinct disorders, but to which the profession usually ascribe a difference of cause and nature;—some, according to their views, being diseases of debility,—some, nervous—some, inflammatory. Now, connecting this with the circumstance that the subjects of all these, so styled, different diseases have *remissions* and *exacerbations*, and have each a greater or less number of the symptoms or shades of symptom, constituting the particular type of disorder, so well known to the vulgar by the term AGUE; for which, the same vulgar are aware, there is no power so generally applicable, as bark or the passion fear;—to what other conclusion, can an unprejudiced person come, than that all disorders are variations of this one type—that, *abstractedly speaking*, there is but ONE DISEASE!

If this, then, be true—and its truth may be easily tested in every hospital in Europe—am I not justified in believing that the notions, (for I will not call them principles) which have hitherto guided or rather misguided physicians in their treatment of disease, have been a mere romance of the schools; that their views of its causes have, for the most part, been as erroneous as their modes of cure have been defective; and their nomenclature and narrations throughout, little better than an unmeaning jargon!

We shall conclude these lectures, Gentlemen, by a brief summary of the doctrines which have occupied us during the course. Their importance to the human race, if true, cannot not be for a moment doubted—if proved to be false, I shall be the first to acknowledge my error—but as

I said in the outset I will only appeal to results—to nature.

I have proved, however, I hope to the satisfaction of most of you,

1. That the phenomena of perfect Health consist in a regular series of alternate actions, each embracing a special portion of time.

2. That Disease under all its modifications, is in the first place a simple *exaggeration* or *diminution* of the same actions, and being universally alternative with a comparative state of health, strictly speaking, resolves itself into Fever, REMITTENT or INTERMITTENT, *chronic* or *acute* :—every kind of structural lesion or disorganization, from the *caries* or *decay* of a tooth, to the pulmonary decomposition of *phthisis*, and that state of the knee which is termed *white swelling*, being merely developments in its course:—Tooth-consumption—Lung-consumption—Knee-consumption.

3. That the tendency to disorganization, usually denominated ACUTE or *inflammatory*, differs from the CHRONIC or *scrofulous* in the mere amount of motion and temperature:—the former being more remarkably characterised by excess of both, consequently exhibits a more rapid progress to decomposition or cure; while the latter approaches its respective terminations, by more subdued, and therefore slower and less obvious alternations of the same action and temperature. In what does consumption of a tooth vary from consumption of the lungs, except in the difference of tissue involved, and the degree of danger to life, arising out of the nature of the respective offices of each?

Disease, thus simplified, will be found to be amenable to a principle of treatment equally simple. Partaking of the nature of ague, throughout all its modifications, it will be best met by a practice in accordance with the proper principle of treatment of that distemper. When the doctrine of the Concoction of Humours, held its baneful sway over the mind of the physician, it was considered the greatest of medical errors to repel the paroxysm—each fit being

supposed to be a friendly effort of nature, for the expulsion of a peccant or morbid humour from the body. Like the popular error of our own day, so prevalent in regard to "the Gout," it was deemed to be a salutary trial of the constitution. An ague in spring, was said to be good for a king! That monarchs occasionally became its victims at this season, had no particular share in the revolution which has since taken place in medical opinion. So late as the time of Boerhaave, a physician asserted, that if he could produce a fever as easily as he could cure it, he should be well satisfied with his own skill! The consequence of such notions was, that the practitioner exerted his utmost to increase the heat of the body during the paroxysm,—but the fearful mortality attending the practice had no other effect upon the mass of the profession, than to make them redouble their exertions in the discovery of means of increasing this heat, that they might thereby assist the unknown process which morbid matter was supposed to undergo! One hundred years have scarcely elapsed since the fever patient was wrapped in blankets, his chamber heated by large fires, and door, window, and bed-curtain closed upon him with the most scrupulous attention. The few that escaped this terrible ordeal, were said to be cured—and these *cures*, like *ignes fatui*, only served to delude and blind the practitioner to the awful mortality which followed the practice.

Like the treatment of what was called Syphilis in more recent times, the practice proved infinitely more destructive to life than the disease itself—but, so far from opening men's eyes, the SENIORS of the profession, when the invaluable bark was first introduced into practice, opposed it with a violence and a virulence which has, only since, been paralleled by the resistance they successively offered to the introduction of the variolous and vaccine inoculations. To bring forward any sweeping or useful measure in Medicine, requires a moral courage and perseverance that fall to the lot of few. The man, who wishes to gain at ready notoriety, has only to puff off some inert or mys-

tical mode of treatment, and his success is certain. He must beware of coming before the public with a remedy to which the stigma of poison can be attached. Does not the quack constantly boast of the absolute safety of his remedy!—See, with what pertinacity he contrasts his *vegetable medicine* with the words *mineral poison*, which he uses as a bugbear; as if the vegetable world was all for a blessing, and the mineral all for a bane; and the wonderful part of all this is, that it answers admirably, even with what are termed the educated public—if those can be really educated who know not that table-salt is a mineral—that coal or carbon is a mineral—that iron and lime are minerals, and that all of these mineral substances actually enter, more or less, largely into the economy of our living frames! To sum up the whole, every vegetable substance is the product of the earth, the greater portion of which is of mineral origin. Do the public know that there are such substances as opium and hemlock, when they confide so innocently in the term *vegetable* medicine?—Are we not told in the Book of Ecclesiasticus (chap. 38, v. 4,) that, "The Lord hath created *medicines* out of the EARTH and he that is wise will not abhor them!"—Who, after this, will dare to rave against *mineral* poisons!

As *now* practised, MEDICINE is little better than a copy of the exploded NAVIGATION of the ancients. Taking his bearings, less by the observation of the fixed stars, than by every little eminence and prominent locality, the ancient mariner, cautiously, if not timidly, crept along shore. With the unerring compass for his guide, the seaman now steers his bark boldly upon the boundless ocean. Despising the localisms that formerly guided his sail, he now completes his voyage to the distant port, in as many days as it formerly occupied him weeks or months. Keeping in view the principles here laid down, the physician may, in like manner, with a few rare exceptions, entirely dispense with the common anatomical landmarks of his art—if he be not startled with the novelty of the light by which we have endeavoured to dispel the darkness that has hitherto

clouded the field of medicine. Taking corporeal unity and totality for his rudder and compass—the brain and nerves for the ocean and seas on which he is to act—temperature and remittency for his tide and season—constitution or habit for the rule by which he must occasionally change his tack—he may now rapidly accomplish ends which, by groping among the intricacies of nomenclature, or by a vulgar attention to mere localities, he can only imperfectly attain by the reiteration of long and painful processes;—he may thus, with ease, obviate difficulties which he previously believed to be insurmountable. Let him not question whether or not the adoption of this will best *serve* his *own* interest. As physic is for the public, not the public for physic, he may rely with certainty, that notwithstanding the present over-crowded state of the profession, the supply of medical aid will, sooner or later, adjust itself to his own, as well as to the general weal.

It was one of the boasts of the eccentric Radcliffe, that he could write the practice of physic on half a sheet of paper: the whole might be comprised in half a line—ATTENTION TO TEMPERATURE! This, you may be sure, was Radcliffe's chief secret—for he was one of the earliest physicians who first introduced what is called the cooling system in fever. When the Duke of Beaufort was taken ill of the small-pox, "the doctor," says Pottis, "was sent for, and found his grace's windows shut up in such a manner, by the old lady duchess, his grandmother's order, that not a breath of air could come into the room, which almost deprived the duke of the very means of respiration. This method had been observed *by the physicians* (!) in her grace's youthful days, and this she was resolved to abide by, as the most proper in this conjuncture, being fearful that her grandson might otherwise catch cold and, by means of it, lose a life that was so precious to her and the whole nation. She had also taken a resolution to give her attendance upon the duke in person, during his sickness, and was in the most violent consternation when Radcliffe at his first visit ordered the cur-

tains of the bed to be drawn open and the light to be let in, as usual, into his bedroom. 'How!' said the duchess, 'have you a mind to kill my grandson?—Is this the tenderness and affection you have always expressed for his person—'tis most certain his grandfather and I were used after another manner, nor shall he be treated otherwise than we were, *since we recovered* [escapes, truly!] and lived to a great age without any such *dangerous experiments.*' 'All this may *be*,' replied the doctor with his wonted plainness and sincerity, 'but I must be free with your grace, and tell you, that unless you will give me your word that you'll instantly go home to Chelsea and leave the duke wholly to my care, I shall not stir one foot for him; which, if you will do without intermeddling with your unnecessary advice, my life for his, that he never miscarries, but will be at liberty to pay you a visit in a month's time.' When at last, with abundance of difficulty, that great lady was persuaded to acquiesce and give way to the entreaties of the duke and other noble relations, and had the satisfaction to see her grandson, in the time limited, restored to perfect health, she had such an implicit belief of the doctor's skill afterwards, that though she was in the eighty-fifth year of her age at that very time, she declared it was her opinion that she should never die while he lived, it being in his power to give length to her days by his never-failing medicines."

Well, Gentlemen, the judicious treatment of all diseases comes, at last, to attention to temperature and to nothing more. What is the proper practice in Ague? To apply warmth, or administer cordials in the *cold* stage; in the *hot* to reduce the amount of temperature, by cold affusion and fresh air; or, for the same purpose, to exhibit, according to circumstances, an emetic, a purgative, or both, in combination. With quinine, arsenic, opium, &c., the period of remission, or medium-temperature, may be prolonged to an indefinite period. In this manner may HEALTH become established in all diseases—whether from some special *local development*, the disorder be de-

nominated mania, epilepsy, croup, cynanche, the gout, the influenza!

In the early stages of disease, to arrest the fever is, in most instances, sufficient for the reduction of every kind of local development. Except in a few rare cases, it is only when the disorder has been of long standing and habitual, that the physician will be compelled to call to his aid the various local measures, which have a relation to the greater or less amount of the temperature of particular parts.

Before concluding, I will just make a remark upon the subject of the doses of all medicines. Perceiving, as you must have done by this time, the utter impossibility of foretelling, in many cases, especially of chronic diseases, the particular agent by which you are to obtain amelioration or cure — and as in almost every case where an agent does not act favourably, it does the reverse—you must see the necessity of commencing your treatment with the smallest available doses of the more potent remedies; of feeling your way, in short, *before* you venture upon *the doses prescribed by the schools.* Let me not, for a moment, be supposed to countenance the homœopathic nonsense.—The twelfth part of a grain of calomel, for example, is a proper medicine to give to an infant; but such dose has no more relation to the millionth or decillionth part of a grain of the same substance, than the twelfth part of a bottle of wine—one glass—has to a *drop* of that liquid. The one has power to influence the whole body;—the other is utterly inappreciable beyond the taste it may impart to the tongue, the only organ it can, by any possibility eveu momentarily influence.—Gentlemen, pity the Homœopathists!—shun the Pathologists and bloodsuckers —and follow only that best guide of the physician—Nature! not in the confined sense of our mortal economy, but in every department of her works. — One great principle binds them together—God, in his Unity, pervades them all!

APPENDIX.

SYPHILIS.

It may just occur to you, that I have not yet given you the slighest idea of my notion of *Syphilis*, an alphabetical combination, with which most of you are so familiar, that were any person to tell you that no such disease exists, you would be inclined to question the sanity of that person's brain.—You would, in fact, have much the same sort of feeling as that most learned and exemplary judge, Sir Mathew Hale, might be supposed to entertain, were he to rise from his grave, and be told there never was such a thing as witchcraft. "No such thing as witchcraft!" he would exclaim. "Why, madman! I have tried and hanged dozens for it, and upon the clearest possible evidence!" So you, Gentlemen, would very naturally in the same vein ejaculate—"What! no syphilis! no *lues venerea!* no secondary symptoms!—and then proceed to explain, with very great gravity, how you had seen at least a thousand and one cases of syphilis, and cured it as many times over with the *specific* remedy, mercury! And yet, Gentlemen, what are syphilis and lues venerea, but the conjurations of medical ignorance, in the darkest of medical times? Like scurvy and scrofula, they are relics of the false doctrine that ascribed all diseases to a humour of the blood. During seventeen years that I have been in the medical profession, I never saw syphilis—no—nor lues venerea, though, nearly eight years of that time, I served as a medical officer in the army—and, surely, you will admit that if such disease exists anywhere, it must be seen in a military hospital! The ulcers called *primary sores*, and the morbid secretion termed *Gonorrhea*, I have, of course, seen thousands of times; but these are not what medical men mean by syphilis.—They mean by that, certain constitutional affections, which, they suppose, have been produced by the imbibition of venereal poisons into the blood, and which they term *secondary* symptoms or

syphilis. All sorts of disorder, I have, certainly, witnessed, which ignorant medical men have associated together under the name of syphilis—just as I have seen another class of symptoms grouped under the terms scrofula and scurvy. But an attentive consideration convinces me, that the greater number of, so called, syphilitic diseases, were the result of mercury, acting as a poison on particular constitutions — while others have neither been the production of this mineral, nor of any venereal poison, but, like consumption or tooth-ache, were the offspring of cold, damp, and other external influences. Why should a disorganizing disease of the nose or palate be looked upon as the exclusive effect of one agent, any more than a similar disease of the teeth or lungs? Suppose we call them "nose-*consumption*," and "palate-*consumption*," you at once perceive the fallacy of the dogma, that all such disorders can only arise from one given cause—and that, unlike all other diseases, they will only yield to one given agent. Is there any other affection in existence for which you have a specific? None!—Do not, then, delude yourselves with the idea that in mercury you have found a specific for disease of the nose and palate, or for osseous and cutaneous disease, however characterized. That such complaints are often cured by mercury, is as true as that the same mineral may cure pulmonary consumption, which I have known it do, more than once; and I remember, particularly, the case of a man who I thought would die of phthisis, but who was, nevertheless, cured, in the Bath Hospital, by mercury. But, as a set-off against this cure, I may give you the case of a fine young soldier of the 26th foot, who came into the Regimental Hospital with a primary venereal sore, though in other respects well, but who died of pulmonary consumption just one month after his admittance, in consequence of the fever produced by the mercury that was given him to cure his sore, but which, by the way, it failed to do. That case made a very great impression upon me, as I believe it did upon the mind of the gentlemen who had treated him.

Well, then, mercury has caused, and may cure, all the diseases which medical men group together under the word syphilis. But so can many other agents.—In most damp climates, where transitions of temperature are rapid, these diseases may be found in abundance. But they have no other relation to venereal disease, than that many of the subjects of them have had that disorder; though many have never had it at all—notwithstanding the scepticism of the practitioner to every assertion on their part to that effect;—for he will sooner believe that his patient is deceiving him, than that his teachers could be wrong—forgetting the observation of Descartes, that "no man can aspire to the name of philosopher, who has not, at least once in his life, doubted everything he had been previously taught." The greater number of the diseases that made their appearance during the Rangoon war, could the subjects of them have been transported to a London hospital, would, I am certain, have been termed and treated as syphilis. In the General Hospitals of India, after that war, you might have seen every kind of ulcer of the throat and palate, every eruption of skin and disease of bone, that were ever supposed to be the exclusive production of the venereal poison;—and of what were these the offspring?—depraved food, hard work, and much exposure. Yes, Gentlemen, every kind of osseous and cutaneous decomposition, every description of organic change—palatal, nasal, and pulmonary consumption, included,—were the effects of the fever excited during that harassing war. Young medical officers, who saw these diseases for the first time, believing them to be syphilitic, prescribed mercury; but mercury, in the greater number of cases, aggravated the existing symptoms, while arsenic, as we have already shown, very often ameliorated them. We sometimes hear it stated, as a fact, that in India, where calomel is given to a great extent, we never see among its effects the symptoms, termed secondary symptoms. But, Gentlemen, this is a false fact! for, while stationed at Bangalore, I saw the bones of the nose give way in a patient under treatment for dysentery by mer-

cury; and many eruptions of the skin and diseases of the joints, I have traced to this mineral. But, there is one thing I must explain to you, and it is this—that while in England the rapid thermal transitions and other influences of the climate lead to affections of the nose, lungs, throat, and joints—the climatic agency of India tends to the production of liver and bowel decomposition instead; and that is the reason why, in England, mercury more frequently gives rise to what are termed "the syphilitic symptoms," than it does in India, where it more often produces the very dysenteric disease and hepatic destruction, which, I admit at the same time, in other instances, I have known it to prevent and cure. It is like every other agent in nature, a two-edged weapon, cutting right and wrong, according to constitution and predisposition; and this shows you the necessity, when you try its powers, of beginning it in small doses, and watching its effects with a scrupulous attention. But, with regard to what are termed the secondary effects of the venereal poisons,—the only secondary symptoms which I have ever known to result from either a gonorrhæa or a primary sore, have been an occasional bubo; and, in rare cases, the train of symptoms known by the name of rheumatism; —and this, perhaps I shall be told, is evidence of a poison in the blood —of a syphilitic taint—of lues venerea!—Gentlemen, the very same train of symptoms take place daily, in particular constitutions, after the bruise of a toe, or the introduction of a bougie into the urethra. Can there be a poison in the blood in either of these cases? To the same causes I have traced eruptions of the skin; and it is quite possible that eruptions may also be the effect of a sore or gonorrhæa in persons predisposed to cutaneous disease, though, even in this case, you may be deceived by the treatment; for the copaiba, so often given for gonorrhæa, can of itself produce both cutaneous disease and rheumatism. Oh, many and many a time, have I seen diseases produced by copaiba, set down to the phantom syphilis! and, when mercury cured them, which it sometimes

did, the proof of the imaginary cause was supposed to be complete!

But however produced, Gentlemen, the various constitutional affections ascribed to syphilis are not, like small-pox or measles, *specific* diseases; neither are they, *any more than these acknowledged specific diseases,* to be *specifically* met. The specific origin of small-pox is indubitable, yet what specific do we employ in its treatment? —Why, then, suppose that affections, the origin of which cannot be proved, will be an exception to everything we really know of disease and its treatment. Like every other complaint in existence, the disorders under consideration may yield to every agent in the Materia Medica, or may fail to yield to any; and, what is more, they may all get well without any medicine whatever. Even the primary diseases cannot be treated specifically. Copaiba will cure gonorrhæa in one man and fail in another; nay, I have known it cure a particular individual at one time, and aggravate his complaint the next time he had the misfortune to catch it. I have known gonorrhæa cured by a fever, and I have known a fever to bring back the discharge where it had previously ceased. A glass of gin and water will produce the same curative effect in some cases, and reproduce, or aggravate the disorder, in others.—Oh, I should like to see a specific for any disease!

I am old enough to remember the hospital practice in gonorrhæa—when, even in the London hospitals, mercury was repeatedly given to salivation in every case, and that too by men who were the reputed oracles of the day in every kind of venereal disease. To doubt them was to expose yourself to a martyrdom of ridicule and calumny Is there a surgeon, pretending to respectability, who would now follow such a practice? When the army medical officers first bruited the idea, that venereal sores of every kind could be cured without mercury, the profession in civil life were, almost to a man, incredulous, or what is the same thing, they affected incredulity; for it was not to their interest to believe. If you showed them a person so

cured, they would shake their heads, and say—"Ah, he will be sure to have secondary symptoms!" and this imaginary contingency operated, for a long time, as an intimidation, both with the younger members of the profession and the public. But, mark the result of a change of practice—a change forced upon the medical civilians by the army practitioners, and the intelligent military officers, who had seen their treatment in the hospitals of the service. As the non-mercurial treatment of primary sores gradually gained ground, "secondary symptoms" diminished at the same rate. Secondary symptoms, Gentlemen, have only lately been found out, in most cases, to be the primary symptoms of a bad practice! Yes! the rotten skulls which are still to be found in our museums—with all the other beautiful specimens of diseased bones, which, in our younger days, were so abundant in hospitals—in the great majority of cases were the production of long and harassing courses of mercury! That this mineral, like other agents, may often be employed with benefit in osseous disease, and in sores, eruptions, &c., is as true as it may be advantageously employed in any other disease; but to give it as a *specific*, for these or any other complaints, is a specimen of ignorance which we hope soon to see vanish from the practice of medicine. When the mercurial treatment was in greatest vogue, secondary symptoms were most numerous;—but the medical men of that day, with all this staring them in the face, supposed it to be the result of too little mercury having been employed in the primary treatment! Only think of "too little mercury!" after they had pushed it, over and over again, to salivation, so as to leave their patients, frequently, without a tooth in their heads. These practitioners resembled the celebrated Sangrado, who, when his patients died, after he had drawn almost every drop of blood from their bodies, and drenched them with warm water while they were able to swallow it, declared that their deaths could not have happened, if they had been sufficiently bled, or had taken warm water enough!

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